



**CALIFORNIA  
TRANSIT  
ASSOCIATION**

1415 L Street, Suite 200 • Sacramento, CA 95814  
Phone (916) 446-4656 • FAX (916) 446-4318  
E-Mail: info@caltransit.org  
www.caltransit.org

## Membership Application

Membership Information - The information provided will be published in the Membership Directory.

***Please Print!***

Date: \_\_\_\_\_

Agency/Business: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_ Web Address: \_\_\_\_\_

Name of Primary Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Please check the membership category you are joining:

- Public Transit System     Commuter Rail Agency
- Transit Industry Supplier     Transit Support Group

Please describe in 25 words or less the nature of your agency, business, or why you chose to join the Association. This information will be printed in the Membership Directory.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please send your application, along with your dues payment, to

California Transit Association  
1415 L Street, Suite 200  
Sacramento, CA 95814  
Voice: 916/446-4656 Fax: 916/446-4318

Check     VISA     MasterCard     American Express    Amount \$ \_\_\_\_\_

Account Number: \_\_\_\_\_ . \_\_\_\_\_ Expiration Date: \_\_\_\_ - \_\_\_\_

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_