



APRA Membership Application

Automotive Parts Remanufacturers Association - EUROPEAN APPLICATION

Company Name _____

Complete Mailing Address _____

Telephone _____ Fax _____ Email _____

Name / Title _____

Signature _____ Website _____

Please complete the LISTING sections for your company type below.

This is how your company will be identified for all APRA purposes (i.e. publications, clinics, conventions) Other membership types include Warehouse & Educational Institution Member. Call APRA for information.

REMANUFACTURER

List items you REBUILD:

REMANUFACTURER DUES

No. of Employees	Annual Dues
1-50	€620
51-100	€850
101 or more	€1150
Our Annual Dues	

SUPPLIER

Check one Core Supplier
 Manufacturer Supplier

List items you SUPPLY:

MFR. REPRESENTATIVE

This membership does not apply to company sales personnel. You must be an authorized rep. of 2 or more manufacturers engaged in the automotive aftermarket.

List manufacturers you REPRESENT:

SUPPLIER / MFR. REP. DUES

Supplier Dues	€620
Mfr. Rep. Dues	€360
Our Annual Dues	

ALL NEW MEMBERS

Check your product specialties

<input type="checkbox"/>	A/C
<input type="checkbox"/>	Brake
<input type="checkbox"/>	H.D. Brake
<input type="checkbox"/>	Clutch
<input type="checkbox"/>	CV & Racks
<input type="checkbox"/>	Electrical
<input type="checkbox"/>	Electronic & Mechatronic
<input type="checkbox"/>	Engine Components
<input type="checkbox"/>	Volume Transmission
<input type="checkbox"/>	H.D. Transmission

REBUILDERS ONLY	YES	NO
Do you reman Heavy Duty?	<input type="checkbox"/>	<input type="checkbox"/>
Do you do on-vehicle repair?	<input type="checkbox"/>	<input type="checkbox"/>
If YES: <input type="checkbox"/> Auto <input type="checkbox"/> Truck <input type="checkbox"/> Other		

Charge my: Visa MasterCard

Card Number: _____

Security Code: _____ Exp. Date: _____

Cardholder's Name: _____

Signature: _____

EURO WIRE TRANSFER (Euros Only)

Final Beneficiary Name: Automotive Parts Remanufacturers Association

Intermediary Bank Name: Citigroup Global Markets Deutschland AG

Intermediary Bank Address: Reuterweg 16, 60323 Frankfurt am Main, Germany

Intermediary Bank BIC: CITIDFFF

Beneficiary Bank: PNC Bank N.A.

Beneficiary Bank Address: 249 Fifth Avenue, Pittsburgh, PA 15222

Beneficiary Bank Swift BIC: PNCCUS33

Bank Account: DE43502109004113817009

Final Beneficiary Address: 7250 Heritage Village Plaza, #201 Gainesville Virginia USA 20155

Final Beneficiary Account: 781002484

NOTE: Pay full ANNUAL DUES regardless of time of year you apply for membership. Your dues will be pro-rated by quarters in your second year of membership.

APRA • 7250 Heritage Village Plaza, #201 Gainesville, Virginia USA • Phone +1 703 968-2772 • Fax (703) 753-2445