



ASSOCIATE MEMBERSHIP APPLICATION

Competitive Carriers Association • 601 New Jersey Ave NW Suite 820 Washington, DC 20001
(800) 722-1872 • (866) 436-1080 fax • www.ccamobile.org

(Please complete all fields)

Company Name _____

Contact Person _____ Title _____

Address _____ City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

Website Address _____

Billing Contact _____ Title _____

Phone _____ Fax _____ Email _____

Please provide a brief description of your company's products and/or services:

CCA requires new applicants to have an existing CCA Member sponsor and a letter of reference from that member:

Name of Sponsoring Company: _____

Name of Sponsoring Individual: _____

Annual Membership Dues: BASED ON ANNUAL REVENUE IN THE WIRELESS INDUSTRY

- \$0-\$40Mil: \$3,739
- \$40Mil-\$75Mil: \$6,232
- \$75Mil-\$150Mil: \$12,463
- \$150Mil-\$250Mil: \$18,695
- \$250Mil-\$500Mil: \$31,158
- >\$500Mil: \$67,980

Total revenue for your company: \$ _____

Method of Payment: (Select the type of payment being used)

- Check
- Master Card
- Visa
- AMX
- Discover

Name on Card: _____

Card Number: _____ Expiration: (MM/YY) ____/____

Signature: _____

I agree to receive Competitive Carriers Association emails containing news, updates and promotions regarding CCA membership, events and association news. You can withdraw your consent at any time.

All membership applications must be approved by the CCA Board of Directors. If membership is not granted, applicant's application fee will be refunded. CCA's Membership period is based on calendar year.