



# Los Angeles Parking Association Membership Application

Thank you for your interest in the Los Angeles Parking Association. Please provide the following information for our records.

## Applicant Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Title: \_\_\_\_\_ Organization: \_\_\_\_\_

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

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

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

Email: \_\_\_\_\_ Web Site: \_\_\_\_\_

Principals and/or Officers:  
(to be included in membership directory and on mailing list)

## Membership Type (check one)

- Regular Member (Parking Operator)*
- Dues: \$100-\$1,000 per month-paid quarterly\*  
(\* Based on size of Operation)

Number of locations: \_\_\_\_\_ Total Spaces: \_\_\_\_\_

- Associate Member (Parking Vendor/Service Provider)*  
Dues: \$375 per quarter

Nature of Business & Product: \_\_\_\_\_

## Contact Information

Greg Spiker  
Los Angeles Parking Association  
1100 South Flower Street, # 3300  
Los Angeles, CA 90015  
Phone: 213 896-8900 Ext 122  
Fax: 213 744-0118

## Payment Information (check one)

- Payment Attached:**  
Please return your completed application with a check made payable  
To: Los Angeles Parking Association
- Bill Me:**  
Please return your completed application and we will send you an invoice.

**Membership will be officially activated upon receipt of the completed application and dues check.**