

SCHOOL TRANSPORTATION ASSOCIATION OF MASSACHUSETTS

Please forward this completed form and dues payment to:

76 North Bedford Street
East Bridgewater, MA 02333

Please direct inquiries regarding dues and the completion of this form to:

TEL: (508) 378-0440 or FAX: (508) 378-8970

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(Please check one.) This is a **NEW** membership application. This is a **MEMBERSHIP RENEWAL**

NEW APPLICANTS Only:

I hereby apply for membership in the category indicated below in the School Transportation Association of Massachusetts, Inc., and if accepted, agree to support the objectives of the Association.

Signature

Date

TYPE OF MEMBERSHIP AND DUES PAYMENT:

Active Members: An individual or firm engaged in providing school transportation services through the ownership or operation of school transportation services for public, private, or parochial school systems. ("School bus contractors")

(Please determine annual dues payment by completing the worksheet on the back of this form. Then enter total dues payment here.)

Total number of vehicles: _____ Amount of annual dues: _____

Affiliate Members: Any school district, group, or individual having similar goals or interests to those of the Association. (School systems, Head Start groups, interested individuals)

Please check the category which applies:

- (A) An Affiliate Member which owns and operates its own vehicles.
- (B) An Affiliate Member which contracts with an Active Member of the Association;
- (C) An Affiliate Member which contracts with a firm which is NOT a member of the Association.
- (D) Other

(Please determine the annual dues payment by completing the worksheet on the back of this form. Then enter total dues payment here.)

Total number of vehicles: _____ Amount of annual dues: _____

Associate Members: Any person or firm which is engaged in the manufacture or distribution of equipment, materials, supplies, or services to Active members. ("Vendors.")

Nature of business: _____ Annual dues: \$200.00

ACTIVE and AFFILIATE Members may elect to pay annual dues in two installments: The first shall be paid by September 1 and the second by December 31. Please check here _____ if you are exercising this option.

AMOUNT OF DUES PAYMENT ENCLOSED: \$ _____

I hereby certify to the Association that all information contained herein is complete and accurate to the best of my knowledge.

Signature: _____

Date: _____

**BOTH SIDES OF THIS FORM MUST BE COMPLETED.
ANNUAL DUES ARE DUE ON SEPTEMBER 1.**

**MEMBERSHIP INFORMATION AND WORKSHEET:
ALL NEW AND RENEWAL MEMBERS MUST COMPLETE THIS FORM. THANK YOU.**

Name of Contact Person (Individual to whom mailings are to be sent.): _____
 _____ Name of persons completing this form, if
 different: _____

COMPANY/SCHOOL DISTRICT NAME: _____

Mailing Address: Street, P.O. Box: _____

City: _____ State: _____ Zip: _____

Telephone: _____ FAX: _____

Please complete the portion of this form which pertains to your category of membership.

ACTIVE MEMBERS AND AFFILIATE MEMBERS, CATEGORIES (A) and (C):

Please enter number of:

Type I School Buses:	_____
Type II School Buses:	_____
Wagons, vans, & cars:	_____
Chaircars:	_____
Spares: (Other vehicles subject to use for pupil transportation.)	_____
Total Number of Vehicles:	_____

NOTE: Article V, STAM Bylaws: "To determine the number of vehicles to be used to compute the dues, all types of vehicles that are used primarily to transport pupils shall be counted, including spares. Where several locations or corporations are essentially under the same ownership, then the entire total of all units in all locations (in Massachusetts) shall be used to establish a single (membership) annual membership fee."

To determine annual dues fee, find the fleet size category in the column on the left and read across to find annual dues payment in column on the right.

FLEET SIZE:	ANNUAL DUES:	7D & OTHER REVENUE GENERATING VEHICLES ANNUAL DUES:
1 - 2	\$ 250.00	\$ 125.00
3 - 5	\$ 300.00	\$ 150.00
6 - 10	\$ 400.00	\$ 200.00
11 - 15	\$ 500.00	\$ 250.00
16 - 25	\$ 700.00	\$ 350.00
26 - 50	\$1,000.00	\$ 500.00
51 - 75	\$1,400.00	\$ 700.00
76 - 100	\$2,200.00	\$1,100.00
101 - 150	\$3,000.00	\$1,500.00
151 and Over	\$4,000.00	\$2,000.00

AFFILIATE MEMBERS: (Categories (A) and (C), see above.)

Category (B): A school district which contracts with an Active Member: \$200.00

Category (D): "Other:" Dues shall be set on a case-case-basis by the Board of Directors.

Applicants should attach statement of interest and explanation
of activities with this application.

ASSOCIATE MEMBERS: \$200.00

MULTIPLE LOCATIONS: Members in any category may have mailings sent to multiple locations for a subscription fee of \$120.00 per year. Members enrolling in this service are asked to (1) include a "roster" of names and addresses to whom mailings are to be sent and (2) add \$120.00 per additional location to their membership dues payment check.