Membership Application

Pennsylvania Amusement and Music Machine Association

BUSINESS INFORMATION

Company: _____ **Principal's Name:** _____

Main Contact (if different than principal): _____ **# of Employees:** _____

(2 part-time employees = 1 full-time employee)

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Email:** _____ **Website:** _____

Principal's Signature: _____ **Date:** _____

Company Is: ☐ Sole Proprietor ☐ Partnership ☐ Corporation/LLC

Sole Proprietorship: Have you been convicted of a felony within the last 10 years? ☐ **Yes** ☐ **No**

Partnership: Has any partner been convicted of a felony within the last 10 years? ☐ **Yes** ☐ **No**

Corporation: Has any officer been convicted of a felony within the last 10 years? ☐ **Yes** ☐ **No**

Conviction: _____

MEMBERSHIP CATEGORIES

☐ **Regulator (Operator) Membership:** Engaged in the business of owning/operating no less than ten (10) coin operated amusement devices and/or music machines in locations in which you do not have an ownership interest.

☐ **In State** ☐ **Out of State** (no voting rights) ☐ **Yearly:** $1,500 ☐ **Monthly:** $1,800.00 Annually/$150 Monthly

TYPES OF LOCATIONS (CHECK ALL THAT APPLY)

☐ Amusement Arcades	☐ Amusement Parks	☐ Bars/Restaurants	☐ Bowling Centers
☐ Family Entertainment Centers	☐ Food Vending/Confections	☐ Miniature Golf Locations	☐ Street Locations

☐ Other: _____

TYPES OF PRODUCTS (CHECK ALL THAT APPLY)

☐ ATMs	☐ Bulk Vending	☐ Cigarette Vending	☐ Electronic Darts	☐ Food
☐ Foosball Air Hockey	☐ Jukeboxes	☐ Kiddie Rides	☐ Legalized Gaming	☐ Payphones
☐ Photo Booths	☐ Pinball Games	☐ Pool/Billiards	☐ Redemption	☐ Security Systems
☐ Soft Play Equipment	☐ Vending/Confections	☐ Video Games	☐ Virtual Realty Games	

☐ Other: _____

THREE SUPPLIERS (REFERENCES) WITHIN AMUSEMENT INDUSTRY

1. Company: _____ **Items Supplied:** _____

2. Company: _____ **Items Supplied:** _____

3. Company: _____ **Items Supplied:** _____

☐ **Associate Membership:** Engaged in manufacturing, distribution, or maintenance of equipment or supplies provided to Pennsylvania operators.

- ☐ **Manufacturer/Distributor Membership:** Per sales office with maximum of $2,000.00 **$2,000.00**
- ☐ **Supplier Membership** **$1,000.00**

☐ **Outside of State:** No voting rights **$1,000.00**

☐ **Affiliate Membership:** Individuals/business entity that supports PAMMA's mission (No voting rights) **$500.00**

PAYMENTS

Please **make check(s) payable to PAMMA** and mail to: **PAMMA, 66 Mall Parkway, Muncy, PA 17756**.

If you have questions regarding membership, please contact Courtney at 570-505-6320 or courtney@mielemfg.com.
Please make checks payable to PAMMA and mail to PAMMA, 66 Mall Parkway, Muncy, PA 17756.