



**ASSOCIATION OF TRANSPORTATION LAW PROFESSIONALS**  
P.O. Box 5407, Annapolis, MD 21403 P: 410.268.1311, F: 410.268.1322 E: info@atlp.org

### APPLICATION FOR MEMBERSHIP 2020

**Name:** \_\_\_\_\_  
hereby makes application for membership in the Association of Transportation Law Professionals, Inc.

**Job Title** \_\_\_\_\_

**Company** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Telephone** \_\_\_\_\_ **Fax** \_\_\_\_\_

**E-Mail** \_\_\_\_\_

The information provided in this application is true and correct to the best of my knowledge.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**To qualify for membership in the Association of Transportation Law Professionals you must satisfy one of the following categories (check appropriate box) and provide appropriate information below:**

- Membership Categories:
- A – Category 1A – Attorney
  - B – Category 1B – Non-attorney
  - C – Category 2 – University/College Faculty
  - D – Category 3 – Student

A - I am admitted to practice as an attorney at law in the following jurisdiction(s):

\_\_\_\_\_  
\_\_\_\_\_

I am class of \_\_\_\_\_ from \_\_\_\_\_ Law School

**My practice largely focuses on:**

Regulatory matters in \_\_\_\_\_

Transportation mode:

- Aviation     Maritime     Motor Carrier     Pipeline     Rail
- Other \_\_\_\_\_

I am  In-house Counsel     Outside Counsel    focusing on  Shipper     Carrier issues

B - I am a non-attorney who currently holds the following position regarding transportation or logistics: \_\_\_\_\_  
\_\_\_\_\_

C - I am a member of the faculty of, a post secondary educational institution. List transportation or related subject matters taught \_\_\_\_\_

D - I am a student presently attending: \_\_\_\_\_

Membership benefits include subscriptions to the *Journal of Transportation Law, Logistics and Policy* and *Association Highlights* newsletter, [www.atlp.org](http://www.atlp.org), and opportunities to participate in all educational programs. *Organizational Memberships are also available. Please contact ATLP for further information: [info@atlp.org](mailto:info@atlp.org)*

<b>Annual Dues (1A &amp; 1B)</b> .....	<b>\$345</b>
<b>Government Employees</b> .....	<b>\$125</b>
<b>University/College Faculty</b> .....	<b>\$125</b>
<b>Students</b> .....	<b>\$ 75</b>

*Fiscal year runs from January 1 to December 31. Dues are billed annually on October 1. Please submit application with your full first-year's dues; check must be drawn on a U.S. bank. If you join at some point in the middle of the fiscal year, a prorated amount will be credited with the first dues bill after receipt of your application.*

**Contributions or gifts to ATLP are not deductible as charitable contributions for federal income tax purposes; however, dues, publications, advertising, and registration fees are generally deductible as ordinary and necessary business expenses. Check with your accountant.**

**ATLP MEMBERSHIP APPLICATION - PAYMENT OPTIONS:**

Please indicate payment method: (Please make checks payable to ATLP)

Check # \_\_\_\_\_  MasterCard  VISA  American Express

Account # \_\_\_\_\_ Expiration Date \_\_\_\_\_ CCV# \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Signature: \_\_\_\_\_

**Federal ID #27-0990436**

Revised 9 2019

**I was referred to ATLP by:**

\_\_\_\_\_  
Please provide ATLP member name