



membership

Heartland Carwash Association

**OUR MISSION:**

Strengthen the professionalism of the carwash industry in our eight state region; Illinois, Iowa, Kansas, Minnesota, Missouri, Nebraska, South Dakota, and Wisconsin through the dissemination of information, opportunities for idea exchanges, networking, lobbying efforts, and access to the latest in equipment and supplies.

## HCA ANNUAL MEMBERSHIP APPLICATION

**COMPANY INFORMATION**

Member communications including HCA Splash Newsletter go to primary contact BUSINESS MAILING ADDRESS (Please do not list a location with no US MAIL receptacle.)

Organization \_\_\_\_\_ DBA \_\_\_\_\_

Primary Contact \_\_\_\_\_ E-mail \_\_\_\_\_

Business MAILING Address \_\_\_\_\_  YES  NO Is there a carwash at this location?

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

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

**TYPE OF OPERATION(S)** check all that apply and list quantity in space provided

- Self-Service \_\_\_\_\_
- High Pressure Automatic \_\_\_\_\_
- Tunnel \_\_\_\_\_
- Rollover \_\_\_\_\_
- Pet Wash \_\_\_\_\_
- Manufacturer \_\_\_\_\_
- Distributor \_\_\_\_\_
- Other \_\_\_\_\_

TOTAL LOCATIONS \_\_\_\_\_ TOTAL BAYS \_\_\_\_\_

**OPERATION LOCATION(S)**

Please provide physical address and name for each location owned and/or operated by organization

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**HCA ANNUAL DUES:**

- Carwash Owner or Operator ..... \$125 \$ \_\_\_\_\_
- Manufacturer or Distributor ..... \$125 \$ \_\_\_\_\_

**DUES PAYMENT OPTIONS:**

- Check Enclosed
- Charge My Credit Card  MasterCard  VISA  AMEX  DISCOVER

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ Security Code \_\_\_\_\_

Signature \_\_\_\_\_

Address if different from above: \_\_\_\_\_

\_\_\_\_\_

Please mail, email or fax your completed form to: **Heartland Carwash Association, P.O. Box 42035, Des Moines, IA 50323**  
**info@heartlandcarwash.org | phone/fax 515.224.6845 | www.heartlandcarwash.org**