

ASSOCIATION OF PACIFIC PORTS (APP) APPLICATION FOR PORT MEMBERSHIP

Our Port (_____) joins the Association of Pacific Ports by completing this application. We affirm APP's focus on promoting increased efficiency and effectiveness and providing a forum to network, exchange ideas, and discuss challenges common to all ports throughout the Pacific.

Each member is authorized to name a voting member of the APP Board of Directors to represent the Port during Association business meetings. (The designated voting member may be changed by the Port at any time in the future.) All port commissioners/directors are welcome to attend all APP business meetings, even though each port is entitled to one vote.

Designated to represent our port is:

Name: _____ **Job Title:** _____

Mailing Address: _____

E-mail: _____

Website: _____

Phone: _____

Date of Application: _____



DUES SCHEDULE (Please check the category that fits your port):

- () Ports with gross revenues of less than \$1 million (USD): \$375 USD
- () Ports with gross revenues between \$1 and 7 million (USD): \$1,250 USD
- () Ports with gross revenues between \$7 and 25 million (USD): \$2,500 USD
- () Ports with gross revenues in excess of \$25 million (USD): \$3,750 USD

Membership year runs August 1-July 31.

When completed, please mail with a check based on the Dues Schedule above to:

**Association of Pacific Ports
PO Box 903
Clackamas, OR 97015 USA**

Our tax ID number is 94-1581549.

Please feel free to contact us with any questions. Thank you for joining APP!