



Dealer Membership Application

Please provide the membership information listed below and return to FMDA Headquarters with payment so we can get your membership activated today!

Owner _____ Email _____

General Manager _____ Email _____

Sales Manager _____ Email _____

Service Manager _____ Email _____

Parts Manager _____ Email _____

Address _____ City _____ State _____ Zip _____

Business Phone _____ Business Fax _____

Website _____

Dealer Membership Options

Option 1 – Quarterly Payments of \$250

Option 2 – One annual payment

Enclosed is my one-time payment for \$1,000.

Products Sold

- | | | | |
|-----------------------------------|----------------------------------|----------------------------------|--------------------------------------|
| <input type="checkbox"/> Yamaha | <input type="checkbox"/> Honda | <input type="checkbox"/> BMW | <input type="checkbox"/> SeeDoo |
| <input type="checkbox"/> Kawasaki | <input type="checkbox"/> Harley | <input type="checkbox"/> Polaris | <input type="checkbox"/> Triumph |
| <input type="checkbox"/> Suzuki | <input type="checkbox"/> Victory | <input type="checkbox"/> Vespa | <input type="checkbox"/> Moto-Guzzie |

Method of Payment: Check (payable to **FMDA**) Visa MasterCard

Card # and Security Code _____ Expiration Date _____

Name on Card _____ Signature _____

Please make checks payable to FMDA and return with this form to: 1390 Timberlane Road, Tallahassee, FL 32312
Your membership dues are valid for 12 months from the date that they are processed.