

CENTRAL & SOUTHERN COLORADO LOCKSMITH ASSOCIATION

MEMBERSHIP APPLICATION

() New Membership () Renewal

Name _____
Shop Name _____
Address _____
City _____ State _____ Zip _____
Phone () _____ Fax () _____
Email Address _____

ALOA: yes ____ no. ____ Membership # _____ PRP _____

Other Association Memberships:

1. _____
2. _____

Areas of Interest: (Please check all that apply)

Education: () General Locksmithing () Alarms () Automotive () Safe Servicing
() Safe Openings () High Security Locks () Business Education () Electronic Security
() Closers, Openers & Hardware () other areas not mentioned _____
() Public Image () Group / Trade Advertising Shows () Complaint Arbitration
() Other areas not mentioned _____

Locksmith Services:

() Bulk Purchasing () Taxes and Accounting () Apprenticeship Programs
() Library () Job Referral Services () Committees / Volunteer

CSCLA Dues are \$45 annually and are payable upon application of your acceptance. As a member of the Central & Southern Colorado Locksmith Association, I agree to abide by the rules, regulations and Bylaws of CSCLA. I further agree to abide by the code of ethics as set forth by the Association.

Signature _____ Date _____

Mail to:

CSCLA, P0 Box 392, Colorado Springs CO 80901

BENEFITS OF MEMBERSHIP: Advanced notice of upcoming trainings, seminars, tradeshow and educational experiences. Mentorship experiences with other within the industry that can help you and your business grow. The CSCLA offers information on new products, exchange ideas, notices industry changes and various laws which may affect you and your business.

