## **OKLAHOMA SELF STORAGE ASSOCIATION (OKSSA)**

## **MEMBERSHIP APPLICATION**

`	Associate Memb mber are Vendors and/or nbers have no voting righ	members from other state	
Annual Dues: \$150 First Facility and	d \$50 each additional faci	lity	
First Facility		\$150.00	
Vendor or Association Member		\$150.00	
Number of additional facilities	@ \$50.00	\$	_
TOTAL ENCLOSED:		\$	_
FACILITY OR VENDOR NAME:			
FACILITY ADDRESS:			
CITY:	STATE:	ZIP:	
MAILING ADDRESS:			
CITY:	STATE:	ZIP:	·
OWNER:			<del></del>
OWNER'S PHONE:			
	E-MAIL ADDRESS: WEBSITE:		
DESIGNATED CONTACT:			
CONTACT'S PHONE:			
SHOULD THIS FACILITY RECEIVE I		No	
How many units are in this facility?	What	t's the total square footage:	
How did you learn of our Association:			
If you heard about us from an OKSSA	A member, please list thei	r facility name:	
Are you a member of the SSA?	Yes	No	
Visit www.selfstorage.org for more information There is a 3.5% service fee on all Credit Card		ation.	
CREDIT CARD AMOUNT: CAI			
EXP: CVV:			
NAME ON CARD:			
Mail Application and Check to: OKSSA P.O. Box 471819		Phone: 918-633-1572	
Tulsa, OK 74147-1819	E-mail: oklahomassa@gmail.com		
OFFICE USE ONLY: DATE RECEIVED:	CHECK #: AMT RECEIVED:_		MEMBER #