

## Marine Industry Association of Central Florida

## **2024 Membership Application**

Contact Name			
Company			
Address			
City	StateZip		
Phone # Fa.	Fax #		
Email			
Website			
Years in Business	Number of Employees		
Type of Business 🔲 Corporation 🖵 Partnership 🖵 Sole Proprietor			
Company's Facebook ID			
Type of Business: (Select the single category that best describes your business)			
☐ Boat Dealer	☐ Manufacturer		
☐ Charter Boat or Guide	Marina or Boatyard		
☐ Distributor	☐ Marine Professional		
☐ Education	☐ Yacht Broker		
☐ Insurance, Finance & Documentation	☐ Other		
Annual Dues: \$250			
All membership applications subject to approval applicant agrees to observe and abide by the Charte of Central Florida, Inc.	·		
If paying by check, please make payable to MI application to: MIACF, 11954 Narcoossee Rd, #427 please submit the attached credit card for by email simply call Cathy Case at (407) 498-0079.	, Orlando, FL 32832, or if paying by credit card		
Signature	Date		



## **MIACF**

11954 Narcoossee Rd, #427 Orlando, FL 32720 (407) 498-0079 • Fax (407) 498-0096 cathyc@miacf.org

## **CREDIT CARD AUTHORIZATION FORM**

Please complete the information requested and email this form to cathyc@miacf.org or fax to (407) 498-0096.

Credit Card Payment Type:		
☐ Mastercard	☐ Visa	☐ American Express
Please print clearly or type:		
Card Number		
Security Code		
Valid Expiration Date		
Name On Card		
Cardholder Billing ZIP CODE		
Signature		
Company Name		
Email Receipt to		

By signing above, I authorize MIACF to charge the credit card, listed above, in the amount of \$250.00 for 2024 MIACF Annual Membership Dues.