



Michigan Fitness Club Association

133 W Main Street, Suite 266

Northville, MI 48167

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APPLICATION FOR MEMBERSHIP

I hereby submit my application for membership in the Michigan Fitness Club Association. I agree to abide by the Bylaws of the Association, to cooperate with my fellow industry members and to keep Michigan a leader in the health & fitness center industry.

Company Name _____

DBA (if different than above) _____

Type of Business _____

Owner/Partner _____ Title _____

Contact Person (if different than above) _____ Title _____

Company Address (physical location) _____

City _____ State _____ Zip _____ County _____

Phone _____ Fax _____

E-mail _____ Website _____

Club Name _____

Club Address _____

City _____ State _____ Zip _____ County _____

According to the Association Bylaws, Article II Section 3, "Each member shall pay such dues and other charges as may be set and approved from time to time by the Executive Board." Membership Fee is \$750 per club annually.

- Enclosed is my check for \$ _____
Please make check payable to MFCA & mail to the address listed above.
- Please charge \$ _____ to my Visa Mastercard Discover Amex (select one)
Card Number _____
Security Code _____ Billing Zip Code _____ Exp. Date _____
Name on Card (print) _____
Signature _____

I understand that by providing my mailing address, email address, telephone number and fax number, I hereby consent to receive any and all communications sent by or on behalf of the Michigan Fitness Club Association via regular mail, email, telephone or fax.

Signature

Title

Date