



# 2012 Membership Application

**Long Island Alarm Association**  
P.O. Box 660  
Deer Park, NY, 11729  
Phone: 631-424-0119  
Fax: 631-546-5373

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Sponsored By: \_\_\_\_\_

NYS Alarm License # \_\_\_\_\_

(copy of State License required for regular members)

Number of Employees \_\_\_\_\_

Year Founded: \_\_\_\_\_

Number of Locations \_\_\_\_\_

Federal ID # \_\_\_\_\_

*\*Membership includes the Long Island Alarm Association, the New York State Burglar and Fire Alarm Association as well as the Electronic Security Association!*

Please check the appropriate box and send your dues to the LIAA address above. Please make sure your **check is payable to the Long Island Alarm Association**. You may charge your dues to your credit card using the form below.

Number of Employees	Dues
1 to 5	\$ 550
6 to 10	\$ 712
11 to 15	\$ 842
16 to 25	\$1037
26 to 50	\$1655
51 to 100	\$2045
Associate Member**	\$ 300
Low Voltage Member***	\$ 300



**\*\*An "associate Member is defined as Central station monitoring company, a Distributor/Supplier, or low voltage non installing entity.**

**\*\*\* "A Low voltage member" does not install burglar or fire alarm systems (only home entertainment, central vacs, phones, etc.)**

### Applicant's Information

Please enter the name of the person or company this payment is being made for.

Name as it appears on the card: \_\_\_\_\_

Company Name: \_\_\_\_\_

Credit Card Number:     -     -     -

Expiration Date:   -    
M M Y Y

(enter amount from employee table above) **Total amount due: \$ \_\_\_\_\_ .00**

Please charge to the following credit card:  MasterCard  Visa  American Express