



Please Print and fax or mail to the address below

Auto & Truck Recyclers of Illinois

Application for Membership

Please print or type

Business Name _____
Contact Name _____
Address _____
City _____ County _____ State _____ Zip _____
Phone _____ Fax _____ E-mail _____

Type of Business Activities

(CHECK ALL THAT APPLY)

- Recycler
- New Parts
- Body Shop
- Automotive Mechanics
- Towing
- Import Vehicles
- Domestic Vehicles
- Light Truck
- Other _____

Investment

- 1-4 Employees\$250
- 5-9 Employees\$375
- 10 + Employees\$500
- Associate.....\$250

Amount Remitted.....\$ _____

Mail or fax Completed Form to
Auto & Truck Recyclers of Illinois
2817 White Plains Ct.
Springfield, IL 62704
Fax: 217/793-2277
Email: ILLAutoRecyclers@aol.com
QUESTIONS....877.880.2874