



**Kansas  
Auto Body  
Association**

## Membership Form

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

Primary Contact \_\_\_\_\_

Business Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

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

Company Website \_\_\_\_\_

Year Business Was Established \_\_\_\_\_ # of Total Employees \_\_\_\_\_

0-3 employees \_\_\_\_\_ \$300

4-8 employees \_\_\_\_\_ \$450

9-14 employees \_\_\_\_\_ \$650

15 and over \_\_\_\_\_ \$850

Additional Facility \_\_\_\_\_ \$150 / location

Associate \_\_\_\_\_ \$500. (An associate is any industry segment not a collision repair shop)

**Please remit payment of dues,  
according to this dues structure.**

### ***Don't Stand Alone-Join Your Industry To Make A Difference***

To serve our members and the public of the state of Kansas through leadership, education and initiatives that further uplift the professionalism and business conditions of those engaged in our state's collision industry for the safety and knowledge of the consumer.

Credit Card Type \_\_\_\_\_ Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Card Authorization Signature \_\_\_\_\_

Email to KABA - [jaime@kansasaba.com](mailto:jaime@kansasaba.com)

**Kansas Auto Body Association | 2040 W 31st Street | Suite G #142**

**Lawrence, Kansas 66046 | 316.530.2116**

# Strengthening The Industry



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[www.kansasaba.com](http://www.kansasaba.com)