2024 Service Provider Application

Your company provides an important public service.

We want to do the same.

www.wasterecycling.org
Membership Application for Service Providers

The National Waste & Recycling Association represents for-profit companies that provide solid and medical waste collection, recycling, and disposal services, as well as companies that provide professional services to the waste industry so they can get the information they need to be safer, smarter and stronger.

Provide Your Company Information

Company Name: ________________
_____________________________________________________________________

Division/Subsidiary of: ___________________________________________________________________________________

Mailing Address: ___________________________________________________________________________________

City: ___________________________________________ State: ___________________________ Zip: _______________

Street Address: ___________________________________________________________________________________

City: ___________________________________________ State: ___________________________ Zip: _______________

Phone: ___________________________________________ Toll Free: ______________________ Fax: _______________

General E-mail: __________________________________ Website Address: ______________________

Primary Contact: __________________________________ Title: __________________________

E-mail: ______________________________________________ Phone: __________________________

Cell: ______________________________________________

By providing phone and fax numbers, and email address, the individual or business agrees to receive association information from the Association.

Dues Schedule

To determine your dues payment, please check the chart below to find your company's gross annual revenues in the waste and recycling industry from the last calendar year. Please please a check mark next to your category. The annual membership year is January 1 through December 31. If your revenue exceeds the below chart, please call 202.364.3782

<table>
<thead>
<tr>
<th>Revenue in Millions</th>
<th>Annual Dues</th>
<th>Revenue in Millions</th>
<th>Annual Dues</th>
<th>Revenue in Millions</th>
<th>Annual Dues</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 2</td>
<td>$990</td>
<td>10 and over/less than 17</td>
<td>$7,820</td>
<td>100 and over/less than 150</td>
<td>$30,000</td>
</tr>
<tr>
<td>2 and over/less than 3</td>
<td>$1,570</td>
<td>17 and over/less than 23</td>
<td>$11,620</td>
<td>150 and over/less than 200</td>
<td>$35,760</td>
</tr>
<tr>
<td>3 and over/less than 6</td>
<td>$3,140</td>
<td>23 and over/less than 50</td>
<td>$15,530</td>
<td>200 and over/less than 300</td>
<td>$42,350</td>
</tr>
<tr>
<td>6 and over/less than 10</td>
<td>$4,700</td>
<td>50 and over/less than 100</td>
<td>$23,240</td>
<td>300 and over/less than 400</td>
<td>$56,470</td>
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</tbody>
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Payment Information

For security reasons, we are unable to accept credit card information on this printed form. Please contact us by phone (202-364-3782) to pay by credit card. You may also use a credit card with the online application.

Tax Information: Membership dues are deductible as a business expense but not as a charitable contribution. NWRA’s federal tax ID is 36-6161231.

To pay by ACH:
ABA #: 021052053
UPIC/Acct #: 69260697
Please make sure to note your company name in the transaction notes.

To pay by check, mail to:
National Waste & Recycling Association
Dues Payment
1550 Crystal Drive, Suite 804
Arlington, VA 22202

Please email your completed application to membership@wasterecycling.org
WasteExpo
Are you exhibiting at WasteExpo? Yes [ ] No [ ]

If you are, what name are you exhibiting under? ____________________________________________________________

Booth number: ________________________________ Booth size: ________________________________

Please list your contacts.
Take full advantage of what we offer by ensuring that all of the appropriate people from your company receive important updates and information that affect them.

<table>
<thead>
<tr>
<th>Name</th>
<th>Office Phone</th>
<th>Cell Phone</th>
<th>Email</th>
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</thead>
<tbody>
<tr>
<td>Primary Contact</td>
<td>__________________</td>
<td>__________________</td>
<td>__________________</td>
</tr>
<tr>
<td>Executive Contact</td>
<td>__________________</td>
<td>__________________</td>
<td>__________________</td>
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<tr>
<td>Billing Contact</td>
<td>__________________</td>
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<tr>
<td>Safety Contact</td>
<td>__________________</td>
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<tr>
<td>Contact</td>
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<td>Contact</td>
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</tbody>
</table>

What is your primary business:

__________________________________________________________

Select your type(s) of operations:

Waste/Recycling Collection
- [ ] C&D
- [ ] Healthcare
- [ ] SW
- [ ] Recyclables

Facilities
- [ ] C&D - MRF
- [ ] Composting
- [ ] Healthcare Waste Treatment
- [ ] Landfill - C&D
- [ ] Landfill - MSW
- [ ] MSW - MRF
- [ ] Recycling End-User
- [ ] Transfer Station

Professional Services
- [ ] Civil/Env. Engineering
- [ ] Financial
- [ ] Insurance
- [ ] Legal/Govt. Affairs
- [ ] Other __________________

List the state(s) where your company operates:

__________________________________________________________

Let us know how you heard about NWRA:

__________________________________________________________
PRIOR APPROVAL FORM

PRIMARY CONTACT

Name: ___________________________________________________________________________________
Title: ___________________________________________________________________________________
Company: _______________________________________________________________________________
Address: ________________________________________________________________________________
City: _____________________________________________________________________________________ State: ______ Zip Code: _________
Phone: ___________________ E-mail: __________________________________________________________

I recognize I may give my authorization to NWRA for multiple years and the completion of each signature automatically authorizes PAC solicitations for the respective year.

2024: _________________________________________
Authorized Signature

2025: _________________________________________
Authorized Signature

✓ AUTHORIZATION

Members of the National Waste & Recycling Association must provide prior approval before NWRA PAC can solicit that member’s restricted class executive personnel for NWRA PAC. Granting this approval does not obligate you or anyone in your company to contribute.

The National Waste & Recycling Association is required by federal law to obtain written approval from NWRA’s member companies before discussing potential support for NWRA PAC with their executive and administrative (those with decision-making authority) personnel, shareholders, and the immediate families of all these groups (collectively known as the “restricted class”); hourly employees are specifically exempt from solicitation. Corporations may not approve solicitations by more than one trade association for the same calendar year. We ask that you please take a moment now to fill out this form and return it to NWRA at the address provided below. Signing this form does not constitute a financial obligation or commitment.

Please return completed form to:

NWRA PAC • 1550 Crystal Drive, Suite 804 • Arlington, Virginia 22202
Email: jriley@wasterecycling.org

This form is only for NWRA member companies. Forms received from non-member companies will be returned. This communication is not and shall not be considered a solicitation for PAC contributions.