



Join Now

Upper Tampa Bay Manufacturers Association

Membership Application \$250 Yearly

Date:		Sponsored By:			
Business Name:					
Contact:					
Address					
City:		State:		Zip:	
Phone:		Fax:		E-Mail:	

Our Guarantee

The association will consist only of manufacturing principles or their designated representative. The primary product will be monthly meetings and a monthly newsletter focused on topics that drive business decisions and linkages to association partners that can deliver services tailored to your needs.

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Authorized Representative/Title:

Total:		Check #:		Visa/MC/AMEX		Exp.	
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Please automatically debit this account for membership renewal. _____ (Initial)

Upper Tampa Bay Manufacturers Association
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