

Company _____

Contact _____ Title _____

Address: _____

City _____ State _____ Zip _____ Country _____

Telephone _____ Mobile _____

Website _____ E-Mail _____

OPERATOR MEMBERSHIP (*See Note Below)

Operator membership dues are based on the number of full-time employees; please include owners. (2 part-time employees = 1 full-time employee) All operator members will receive two complimentary badges to the Amusement Expo. Check appropriate box:

- Route Owner Operator 1-9 employees..... \$399
- Route Owner Operator 10+ employees..... \$725
- Other Operator (FEC, Barcade, Pinball Arcade) 1-9 employees..... \$399
- Other Operator (FEC, Barcade, Pinball Arcade) 10+ employees..... \$725

Product Types (check all that apply)

- | | | | |
|--------------------------------------------|---------------------------------------------------|------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Jukeboxes | <input type="checkbox"/> Kiddie Rides | <input type="checkbox"/> Foosball Air Hockey | <input type="checkbox"/> Security Systems |
| <input type="checkbox"/> Pinball Games | <input type="checkbox"/> Bulk Vending | <input type="checkbox"/> Electronic Darts | <input type="checkbox"/> Photo Booths |
| <input type="checkbox"/> Cigarette Vending | <input type="checkbox"/> Legalized Gaming | <input type="checkbox"/> Pool/Billiards | <input type="checkbox"/> Card Swipe Systems |
| <input type="checkbox"/> Video Games | <input type="checkbox"/> Food Vending/Confections | <input type="checkbox"/> Virtual Reality Games | <input type="checkbox"/> Micro Markets |
| <input type="checkbox"/> Redemption | <input type="checkbox"/> Soft Play Equipment | <input type="checkbox"/> ATMs | <input type="checkbox"/> In-Venue Advertising |

Location Types (check all that apply)

- | | |
|-----------------------------------------------------|--------------------------------------------------|
| <input type="checkbox"/> Amusement Arcades | <input type="checkbox"/> Bowling Centers |
| <input type="checkbox"/> Street Locations | <input type="checkbox"/> Water Parks |
| <input type="checkbox"/> Amusement Parks | <input type="checkbox"/> Lodging (Hotels/Motels) |
| <input type="checkbox"/> Family Entertainment Ctrs. | <input type="checkbox"/> Malls/Supermarkets |
| <input type="checkbox"/> Bars/Restaurants | <input type="checkbox"/> Movie Theaters |
| <input type="checkbox"/> Food Vending/Confections | <input type="checkbox"/> Trampoline Parks |
| <input type="checkbox"/> Miniature Golf Locations | <input type="checkbox"/> Other |

Check here If you are interested in listing additional office locations for \$100 per location. AMOA HQ will follow up for details.

ASSOCIATE MEMBERSHIP Check Membership Type (*See Note Below)

ASSOCIATE "A" MEMBERSHIP
Equipment, Music
Distributor — FULL \$575
2 complimentary badges for Expo

ASSOCIATE "B" MEMBERSHIP
Equipment, Music, Consumable Products
Manufacturer — FULL \$685
Supplier — FULL \$575
2 complimentary badges for Expo

CLASSIFIED MEMBERSHIP
Recording Industry, i.e.,
Songwriters, Publishers — FULL \$400
Assn. Executive — FULL \$325
Consultant — FULL \$400
Trade Press — FULL \$400
2 complimentary badges for Expo

PAYMENT INFORMATION

Please fill out the following completely so that your dues are processed correctly. Check appropriate payment form.

Total Due: \$ _____ Check Enclosed VISA MASTERCARD AMERICAN EXPRESS DISCOVER

Credit Card # _____ Exp Date _____ Security Code _____

Name as it appears on Credit Card _____ Zip Code _____

Signature _____

*Note: ALL DUES AMOUNTS INCLUDE A VOLUNTARY \$25 CONTRIBUTION TO COIN-OP CARES & EDUCATION CHARITABLE FOUNDATION. If you do not wish to contribute, please deduct \$25 from above amount. For 2024, it is estimated that 15% of your membership will be directed to lobbying/legislative advocacy expenses. All dues are good for calendar year.