



**Jacksonville Marine  
Transportation Exchange, Inc.**  
Post Office Box 350162  
Jacksonville, Florida 32235-0162  
(904) 634-1599

Membership Application															
Company Information															
Company Name:															
Site Address:															
Mailing Address:															
City, State, Zip:															
Company Telephone:															
Company Fax:															
Web Page:															
Business Type:	<input type="checkbox"/>	Shipping Co.	<input type="checkbox"/>	Terminal Ops	<input type="checkbox"/>	Shipyards/Repair									
	<input type="checkbox"/>	Environmental	<input type="checkbox"/>	Ship Agency	<input type="checkbox"/>	Cargo Services									
	<input type="checkbox"/>	Government	<input type="checkbox"/>	Vendor	<input type="checkbox"/>	Navigation Support									
	<input type="checkbox"/>	Towing	<input type="checkbox"/>	Consulting	<input type="checkbox"/>	Legal									
	<input type="checkbox"/>	Other: Specify _____													
Company Representatives															
Name:															
Title/Position:															
Telephone:															
Mobile:															
E-Mail:															
Membership															
Level		Annual investment	Amount												
Corporate Sustaining Membership		\$1,000													
Small/General Business Membership		\$500													
Individual Membership		\$200													
Ex Officio Membership		Determined by the board													
<p style="text-align: center;"><b>Committee Interest</b></p> <p>Indicate which Standing Committees you might be interested in serving on:</p> <table border="1" style="width: 100%;"> <tr> <td><input type="checkbox"/></td> <td>Agents &amp; Operators</td> <td><input type="checkbox"/></td> <td>Harbor Safety</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Port Security</td> <td><input type="checkbox"/></td> <td>Marine Environment</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Outreach/Gov Affairs</td> <td><input type="checkbox"/></td> <td></td> </tr> </table>		<input type="checkbox"/>	Agents & Operators	<input type="checkbox"/>	Harbor Safety	<input type="checkbox"/>	Port Security	<input type="checkbox"/>	Marine Environment	<input type="checkbox"/>	Outreach/Gov Affairs	<input type="checkbox"/>		Membership Investment	\$
		<input type="checkbox"/>	Agents & Operators	<input type="checkbox"/>	Harbor Safety										
		<input type="checkbox"/>	Port Security	<input type="checkbox"/>	Marine Environment										
		<input type="checkbox"/>	Outreach/Gov Affairs	<input type="checkbox"/>											
<input type="checkbox"/> Check enclosed <input type="checkbox"/> Please invoice for the indicated membership investment to the company address above.		Mail or fax completed application to : JMTX P.O. Box 350162 Jacksonville, FL 32235-0162 Or Fax (904) 634-1593													

*Making Jacksonville the Port of Choice.*