



ALOA Security Professionals Association, Inc.

International Association of Automotive Locksmiths

Add-on Membership Application

ELIGIBILITY FOR MEMBERSHIP

All locksmiths, automotive locksmiths, employee technician, electronic security and security professionals who are actively engaged in their field, have an interest in Automotive Locksmithing and are current members of ALOA Security Professionals Association, Inc. are eligible for membership in the International Association of Automotive Locksmiths (IAAL).

PLEASE TYPE OR PRINT

CANDIDATE INFORMATION

Name: Mr. Mrs. Ms. First _____ Last _____ MI _____

ALOA Member Number _____

Business Name _____

Mailing Address _____

City _____ State _____ Zip Code _____ Country _____

Work Phone _____ Cell Phone _____ Fax _____

Email Address _____

Date of Birth _____ Place of Birth _____

US Citizen? Yes No If No, citizen of what country? _____

I hereby request membership in the International Association of Automotive Locksmiths and submit that I am actively engaged in the following:

Locksmith Automotive Employee Technician Electronic Security

Security Professional

Other _____

ENCLOSED DUES: \$50.00 (US Funds)

METHOD OF PAYMENT (Effective 2/1/2024 there will be a 3% surcharge on all credit card payments).

Check MasterCard Visa American Express Discover

Card Number _____ Expiration Date _____ SEC _____

Print Name on Card _____

Signature _____ Date _____

I certify that I have never been convicted of a felony or any crime involving fraud, dishonesty or breach of trust, and that I meet all the requirements for membership in IAAL.

I understand that in the course of reviewing this application IAAL may review publicly available information for the purpose of verifying the information submitted and perform a background check.

I certify that all statements are true, and as a member, I agree to abide by the rules, regulations, Bylaws and Code of Ethics of ALOA, to the best of my ability. Should my membership be discontinued, I agree to cease use of IAAL insignia.

Signature _____

Date Signed _____

Return to:
ALOA, 1408 N. Riverfront Blvd #303, Dallas, TX 75207
Fax (469) 453-5241 • Email: membership@aloe.org