



COMPONENT MEMBER APPLICATION

Component Members are persons or entities engaged in the manufacture of components for the safe room/shelter industry. Manufacturers have product lines that benefit the industry such as door systems, roofing systems and radios. Others have specific product lines that meet the requirements and guidelines of the ICC/NSSA 500 Standard and the FEMA P-361 guidelines.

Applicant Name: _____

Company Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Fax Number: _____

E-mail: _____ Web Address: _____

NOTE: *The information above will be needed as a minimum requirement for listing
All component members will need to provide listing information as requested by NSSA*

1. Briefly describe the business and products you manufacture as it relates to the safe room industry.

2. Who referred or encouraged you to apply for membership with the NSSA?

3. Briefly describe if you or your company provides safe room compliance presentations or workshops. Would you be willing to help educate clients on safe room compliance standards?

4. I, the undersigned, support the Purpose and Objectives of NSSA. I have read the Bylaws and agree to abide by them. I will strive to meet the highest standards for business.

5. I have read the NSSA Standard and agree to comply with the NSSA Standard in all my activities and functions related to safe room component testing and labeling (if applicable).

6. I submit my first year's dues of \$500 with this application. I understand that my payment will be returned if my application is not approved. Furthermore, I understand that I will receive annual membership renewal notices and that I may be dropped from membership if renewal dues are not received.

Signature

Title

Company

Date

PAYMENT- Choose One

I am printing and mailing in my completed application and enclosing a check for \$500.
(Mail to one of the addresses listed below).

I am e-mailing my complete application to info@nssa.cc. Please send me a QuickBooks generated invoice so I may pay my membership via credit card (*Visa, MasterCard, American Express, Discover, PayPal, or Bank Transfer*).

Send your completed application with copies of your reports to:

NSSA

PO Box 41166

Lubbock, TX 79409-1166

OR

NSSA

Reese Technology Center

1103 Fillmore Drive

Building 250, Room104

Lubbock, TX 79416

877-700-6772

info@nssa.cc