



North East Asian American Retailers Association

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Burlington, MA 01803

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Allied Membership Application

Company Name _____

Address _____

City _____ **State** _____ **Zip** _____

Tel _____ **Fax** _____ **Email** _____

Fed Tax ID _____ **Web Link** _____

Type of Business _____

Contact Person 1 _____ **Title** _____

Cell # _____ **Email** _____

Contact Person 2 _____ **Title** _____

Cell # _____ **Email** _____

Contact Person 3 _____ **Title** _____

Cell # _____ **Email** _____

Authorized Signature

Date

