



Delta Nu Alpha

Membership Application



PLEASE PRINT OR TYPE

Last Name First Name Middle Initial

Company Name

Primary Mailing Address (Home/Office) Street/PO Box City State Zip

Office Phone Home Phone Fax Number

*Email Address (REQUIRED-this in the primary means of communication! Emails will be sent from admin@deltanualpha.org)

Type of Business:

Carrier Forwarder / Property Broker 3PL Shipper Student Other

Type of Carrier: Truck Rail Air Expedited

Membership Level:

Gold (\$100 - Includes annual subscription to the Journal of Transportation Management)

Silver (\$50) Student (\$25)

Chapter number if known _____ Send me a membership certificate

Payment Preference: Check (Payable to Delta Nu Alpha) Visa MC American Express

Card Number Expiration Date V-Code

Name Printed on Card Signature

Card Holder's Billing Address Street/PO Box City State Zip

Payment of Delta Nu Alpha dues now satisfies your Chapter, and National Dues requirements. Delta Nu Alpha dues may be deductible as a business expense; however do not qualify as a charitable contribution.
 Mail Application (if paying by check) to: 265 North Chicago Avenue #2, South Milwaukee, WI 53172
 FAX Credit Card Applications to: 630-499-8505