TEXAS CAST METALS ASSOCIATION, INC.  
MEMBERSHIP APPLICATION

Name _________________________________________ Email Address ________________________ 
Address ______________________________________ City ________________________________ 
State _________________ Zip Code _______________ Telephone _____________________________ 
Contact Person ________________________________ Fax Number ___________________________

The Purpose of Texas Cast Metals Association, Inc.

To promote the common interest of the metal casting industry through the development of an 
effective legislative action program and improve communications with elected officials.

To develop and publicize the position of the metal casting industry regarding specific legislation, 
regulations and any other governmental activities affecting the metal casting industry.

To undertake such other activities as will benefit the common interest of the metal casting 
industry.

Annual dues are payable in advance, based on typical, current-year employment. Dues are for the 
period January 1 to December 31.

<table>
<thead>
<tr>
<th>Type of Metal Poured: (please circle number of employees and type of metal poured)</th>
<th>No. of Employees</th>
<th>Annual Dues</th>
</tr>
</thead>
<tbody>
<tr>
<td>STEEL</td>
<td>BRONZE &amp; BRASS</td>
<td>1 - 49</td>
</tr>
<tr>
<td>IRON</td>
<td>MAGNESIUM</td>
<td>50 - 99</td>
</tr>
<tr>
<td>ALUMINUM</td>
<td>OTHER</td>
<td>100 - 149</td>
</tr>
<tr>
<td></td>
<td></td>
<td>150 - 299</td>
</tr>
<tr>
<td></td>
<td></td>
<td>300 - UP</td>
</tr>
<tr>
<td>ASSOCIATE MEMBER (NON FOUNDRY)</td>
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</table>

We hereby apply for Membership in the Texas Cast Metals Association. UPON ACCEPTANCE of this 
application, the undersigned organization becomes a member of TCMA and agrees to observe the bylaws 
of the Association, pay annual dues, and give due consideration to activities which will contribute to the 
advancement and growth of the Texas Cast Metals Association, Inc. UPON ACCEPTANCE, The Official 
Company Representative will be:

Voting Representative ______________________________ Title _______________________________

Signature ______________________________ Date _______________ Email _____________________

Additional Email Addresses ___________________________________________________________________

Return Completed Application to the Texas Cast Metals Association

6529 Cliffside Dr. North Richland Hills, TX 76180 (817) 485-4769 csmith.tcma@sbcglobal.net