

MEMBERSHIP APPLICATION

Company Name _____
Physical Address _____
City _____ State _____ Zip _____
Mailing/Billing Address _____
City _____ State _____ Zip _____
Phone Number _____ Alternative Phone Number _____
Fax _____ Website _____

CONTACTS

Name _____ Position _____ Email _____
Name _____ Position _____ Email _____
Name _____ Position _____ Email _____

LICENSED ELECTRICIAN OR NABCEP CERTIFIED INSTALLER

Name _____ License Number _____

HOW DID YOU HEAR ABOUT THE SUNNY PRO CLUB?

Trade Show Mailer Email Other _____
 Online Banner SMA Representative Distributor _____
 SMA Website Solar Academy Magazine Ad _____

I would like to be included in newsletter and email updates
 Please add my company to the SMA Online Solar Professional Listings

Please submit completed application and membership fee via: Mail: **SMA America, LLC**
Sunny PRO Club
6020 West Oaks Blvd, Ste 300
Rocklin, CA 95765
Fax: 916 625 0871
Email: SunnyPROClub@SMA-America.com

I have read and understand the Terms & Conditions of the Sunny PRO Club.

Signature _____ Date _____

Please Check Payment Type: Check Visa MasterCard American Express

Card Number _____ Exp. _____