



SEMA BRANCH OFFICE FORM

*Branch Offices must be in the same Business Category as Main/Parent Company

Main/Parent Company Name _____

Main/Parent Business Category (i.e. Manufacturer, Retailer, etc.) _____

Main/Parent Company SEMA I.D.# _____

BRANCH OFFICE COMPANY NAME _____

Street Address _____

City _____

State _____ ZIP code _____

Province _____ Country _____

Telephone _____ Telephone 2 _____ Fax _____

Company E-mail _____ Company Web Site _____

Mailing Address _____

City _____ State _____

ZIP Code _____ Province _____ Country _____

Please send SEMA mailings to: Street Address Mailing Address

Business Description (25 words or less, description must be consistent with the Parent Company's Category) _____

SEMA reserves the right to edit for content.

BRANCH OFFICE EMPLOYEES

(List key employees who should receive relevant information)

	Title	E-mail
Primary Contact _____		
President _____		
OEM-Related _____		
Marketing/Sales/PR _____		
Publications _____		
R&D/Technical _____		
Internet _____		
International Marketing _____		
Legislative _____		
Human Resource _____		
Other _____		

Authorized By _____ Date _____