



List Your Company in

The GASSA Vendor Resource Directory!

The [GASSA Vendor Resource Directory](#) is a page on the GASSA website dedicated to helping our members connect and meet their needs. This page reaches key decision makers researching vendors and products they need for the self-storage industry!
Get your company listed in the vendor resource directory today!

*Each listed company must first be a GASSA Member. Select that payment option below if not a current member for additional \$250.
 *Corporate sponsors automatically included on page

Select Business Type (up to 3) and Complete Contact Info:

- | | | |
|-------------------------------------------------|-------------------------------------------------------|-----------------------------------------------------------------|
| <input type="checkbox"/> Auctions | <input type="checkbox"/> Legal Firm | <input type="checkbox"/> Security |
| <input type="checkbox"/> Brokerage | <input type="checkbox"/> Management Company | <input type="checkbox"/> Storage Facility Owner |
| <input type="checkbox"/> Builder/Construction | <input type="checkbox"/> Marketing | <input type="checkbox"/> Storage Facility MGMT Company/Operator |
| <input type="checkbox"/> Consulting/Feasibility | <input type="checkbox"/> Other Services | <input type="checkbox"/> Storage Facility Developer |
| <input type="checkbox"/> Financial | <input type="checkbox"/> Other Services-Trucks/Moving | <input type="checkbox"/> Storage Facility Future Developer |
| <input type="checkbox"/> Insurance | <input type="checkbox"/> Other Services-Doors | <input type="checkbox"/> Supplies |
| <input type="checkbox"/> Legal | <input type="checkbox"/> Real Estate | <input type="checkbox"/> Technology |

Contact Name _____

Company Name _____

Mailing Address _____

City/State/Zip _____

Telephone _____

Email _____

Website _____

**This will appear on your vendor listing.*

Indicate Payment Option:

- Option 1 (\$400)
- Option 2 (\$300 + donate an item with a \$100 value to GASSA Charity Auction at Annual Conf in October)
- Membership Dues (\$250) (select only if not a current GASSA member)

Payment Terms

CHECK Make payable to GASSA and mail to PO BOX

1128, LaGrange, GA 30241.

CREDIT CARD AMEX MC VISA DISCOVER CARD # _____ EXP. DATE _____ CCV _____

NAME ON CARD _____ SIGNATURE _____

