

MEMBER CONTACT SCHEDULE



Company Name _____

POSITION	CONTACT	PHONE	FAX	EMAIL
Primary Contact				
(title)				
Human Resources (name)				
(Address if different from above)				
(title)				
Environmental Officer				
(title)				
Safety Manager				
(title)				
Plant Manager				
(title)				
Transportation Manager				
(title)				
Quality Manager				
(title)				
Govt. Affairs Director				
(title)				
Tax Manager				
(title)				
Attorney/Legal Counsel				
(title)				
Finance/Accounting				
(title)				
Marketing/Sales				
(title)				

Please complete this form and return it to the VMA. Our fax number is 804-780-3853