

Interested in becoming a member of the South Dakota Independent Automobile Dealers Association?



IN ADDITION TO THE NATIONAL BENEFITS, ALL SOUTH DAKOTA MEMBERS RECEIVE:

- **Auto Owners.** Up to 10% discounts
- **VIP Card = \$6000 + or -** in discounts!
- **Forms programs** with local printer and current laws
- **F & I Products** from preferred providers
- **Other SDIADA preferred provider discounts**
- **NIADA TV Training.**
- **National IADA Membership** Enjoy the benefit of the NIADA, including a subscription to The Use Car Dealer.

We've moved! Please update your records.

Our new address is: **P.O. Box 1151**


Sioux Falls SD. 57101

402-639-0664 Cell Scott Erikson Executive Director

Your call is very important so please leave a message as I could be traveling across the state and will get back to you shortly.



JOIN OR RENEW TODAY! Founded in 1946, NIADA represents more than 38,000 independent automobile dealers nationwide with a mission to advance, educate and promote the independent used car dealer. As the voice of the used motor vehicle industry, NIADA is committed to educating dealers on providing the highest quality service to their customers and staying in compliance with the governing laws and regulations and maintaining a strong presence in Washington, D.C. NIADA offers a wide variety of quality programs, products and services to help you operate a more successful business. A NIADA member pledges to adhere to a strict Code of Ethics based on duty, honor and integrity, and believe in the advancement of small business in support of the free-market system.

 **YES!** I understand as an association member, I pledge to adhere to the code of ethics set forth for the betterment of my industry. By completing this form, I agree that NIADA, its affiliates and subsidiaries may contact me at the mailing address, business and cell numbers and email address provided here and that my consent is not required to make any purchase or as a condition of receiving any member benefits or other offers.

 Name Signature (application must be signed)
 Date

 Business Name State Dealer
 License #

 Mailing Address City State
 Zip Code

 Business Phone Cell Phone Email Website

 Name of Referral: Executive Director Scott Erikson 402-639-0664 email
eriksons@aol.com P.O. Box 1151 Sioux Falls, SD 57101

SOUTH DAKOTA IADA ANNUAL MEMBERSHIP \$250

Pay by Check _____
 Pay by Credit Card Type Circle MC VISA Discover AMX
 Name on Card: _____
 Card Number: _____
 Expiration on Card: _____
 Code on back: _____
 Address for Card: _____
 City: _____ ST: _____ ZIP: _____