

This registration form is for shippers and customers only.
If you are a carrier you will need to complete our carrier survey prior to receiving My Freight Manager access.

Company Name

Contact Name

Address

City State Zip

Phone Fax

E-mail Address

Requested Username (We assign one username per company)

Utilized Modes of Transportation Air Freight Intermodal LTL Ocean Truckload

Utilized Equipment Types Vans Reefers Flatbeds Containers Specialized

Number of full truckload shipments in an average month

Number of less than truckload shipments in an average month

List three commodities that you ship regularly:

Estimated Annual Freight Spend: \$