



2011-2012 MEMBERSHIP APPLICATION

INDIVIDUAL MEMBERSHIP (\$250)

Name (Please Print): _____
Company: _____
Mailing Address: _____
Daytime Telephone: _____ Fax: _____
E-Mail Address: _____
College Affiliation(s): _____
Signature: _____ Date: _____

CORPORATE MEMBERSHIP (\$1,125, includes up to five attendees per meeting)

Company Name: _____	Company Phone: _____
Mailing Address: _____	City, State, Zip _____
Primary Contact: _____	E-Mail: _____
Member 1 Name: _____	Phone: _____
College Affiliation: _____	E-Mail: _____
Member 2 Name: _____	Phone: _____
College Affiliation: _____	E-Mail: _____
Member 3 Name: _____	Phone: _____
College Affiliation: _____	E-Mail: _____
Member 4 Name: _____	Phone: _____
College Affiliation: _____	E-Mail: _____
Member 5 Name: _____	Phone: _____
College Affiliation: _____	E-Mail: _____

JUNIOR MEMBERSHIP (\$150, age 30 and under)

Name (Please Print): _____ Date of Birth _____
Company Name: _____
Mailing Address: _____
Daytime Telephone: _____ Fax: _____
E-Mail Address: _____
College Affiliation(s): _____
Signature: _____ Date: _____

Credit Card payments may be made online:
www.birminghamtipoffclub.com

Return application and payment to:
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