

# MEMBERSHIP APPLICATION FORM



## COMPANY INFORMATION

Name of Company:

Postal Address:

Company Telephone No.:

Physical Address:

City:

Email Address:

Website Address:

## DESCRIPTION OF COMPANY

Please provide a brief description of your company

## MEMBERSHIP CATEGORY

Exploration and Production Companies

Service Companies

## COMPANY REPRESENTATIVE

Name of Main Contact:

Address:

Phone:  E-mail:

Name of Alternate Contact:

Address:

Phone:  E-mail:

## SIGNATURE

I authorize the verification of the information provided on this form. I have received a copy of this application.

Signature of Applicant:

Date: