APPLICATION FOR MEMBERSHIP				
Name				
Occupation/Title				
Company/Affiliation				
Work Address	City		State	Zip Code
Residence Address	City		State	Zip Code
Preferred Mailing Address?	-or-		RESIDENCE	
Work Phone Residence P	Residence Phone Fax			
Mobile Phone	Email			
Member of AAPG? YES -or-	NO			
Professional References – list two references with phone numbers and addresses 1) NamePhone				
Address	City		State	Zip Code
2) Name	Phone			
Address	City		<u></u>	7: 0 1
	•		State	Zip Code
Education – list colleges and universities attended,	aegree(s) rece	eived, and	date of degree(s) (OPTIONAL)
Membership Type	Signature			
ACTIVE \$20. [@] /year ASSOCIATE \$15. [@] /year	Date			
STUDENT \$10. [∞] /year			OT COMPLETE	
LIFE \$200. [∞] (one-time payment) Please make check payable to:	For NPGS Membership Committee Signatures Only			
Nevada Petroleum and Geothermal Society P.O. Box 11526 Reno, NV 89510-1526				