

Affiliate/2nd Member Application

Individual's Name		Title
Company Name		
Your Mailing Addres	s (where you will receive	council mailings)
Address		
City	State	Zip
Office	Cell	Fax
Website:	E-mail:	
Sponsor		
	2nd Member	\$360.00
	Affiliate Member	\$245.00
Signature:		
By sig	gning this application you HBA of Greater Tulsa C	•
Payment Information Check enclosed		
VISA/MC#		Exp. Date:
Signature for Credit	Card	