



Alabama Propane Gas Association

173 Medical Center Drive, Prattville, AL 36066
334-358-9590/334-358-9520 FAX
www.alabamapropane.com

Application for Active Supplier or Associate Membership

(For membership other than Class A Permit Holders, this form should be filled out.)

TO THE BOARD OF DIRECTORS:

We/I hereby (renew our/apply for) membership in the Alabama Propane Gas Association (APGA) and submit herewith a check in payment of the Annual Investment in the Amount and for the Category indicated below:

SIGNATURE _____ TITLE _____ DATE _____

SUPPLIER MEMBERSHIP - Any individual or company having any income from an interest allied or related to the propane gas industry and whose business and ethical standards meet with the approval of the Board of Directors.
The annual investment is as follows:

TOTAL ANNUAL INVESTMENT \$450.00

ASSOCIATE MEMBERSHIP - Any individual employed by or associated with any active member, and whose business and ethical standards meet with the approval of the Board of Directors.
The annual investment is as follows:

TOTAL ANNUAL INVESTMENT \$450.00

NAME OF COMPANY _____

P.O. BOX NUMBER _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

BUSINESS PHONE _____ FAX _____

EMAIL ADDRESS _____

INDIVIDUAL AUTHORIZED TO VOTE _____

ALTERNATIVE VOTING REPRESENTATIVE _____

PAYMENTS TO THE ALABAMA PROPANE GAS ASSOCIATION ARE NOT DEDUCTIBLE AS CHARITABLE CONTRIBUTIONS FOR FEDERAL INCOME TAX PURPOSES; HOWEVER, THEY MAY BE DEDUCTIBLE AS AN ORDINARY AND NECESSARY BUSINESS EXPENSE.

*Every application for membership shall be made to the Executive Director in writing on forms approved by the Board of Directors of the Corporation.

*Election to membership will be affected by a favorable majority vote of the Board of Directors of the Corporation.

MAIL THIS COPY WITH YOUR PAYMENT TO: APGA, 173 Medical Center Drive, Prattville, AL 36066