



## Golden Triangle Business Roundtable

### Subscriber Membership Application

Company Name: \_\_\_\_\_

Local Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

### Contact Information

Representative Name: \_\_\_\_\_

Representative Phone: Office \_\_\_\_\_ Cell \_\_\_\_\_

E-Mail Address : \_\_\_\_\_

### Company Information

Business Activity : \_\_\_\_\_

Home Office Located : \_\_\_\_\_

Web Site URL : \_\_\_\_\_

### If Accepted - Subscriber Dues

Subscriber Annual Dues are \$500.00 Options : Mail Invoice: \_\_\_\_ E-Mail for CC Pmt: \_\_\_\_

Applicant Signature : \_\_\_\_\_

Membership effective upon receipt of payment