

MEMBERSHIP APPLICATION

Mail to P.O. Box 696, Birmingham AL 35202



INDIVIDUAL MEMBERSHIP (\$225).

Name (Please Print): _____

Firm Name: _____

Mailing Address: _____

Daytime Telephone: _____ Fax: _____

E-Mail Address: _____

College Affiliation(s): _____

Signature: _____ Date: _____

CORPORATE MEMBERSHIP (\$1000 for five attendees per meeting).

Firm Name (Please Print): _____ Firm Phone: _____

Mailing Address: _____

Member 1 Name: _____ Home Phone: _____

College Affiliation: _____ E-Mail: _____

Member 2 Name: _____ Home Phone: _____

College Affiliation: _____ E-Mail: _____

Member 3 Name: _____ Home Phone: _____

College Affiliation: _____ E-Mail: _____

Member 4 Name: _____ Home Phone: _____

College Affiliation: _____ E-Mail: _____

Member 5 Name: _____ Home Phone: _____

College Affiliation: _____ E-Mail: _____

Please find enclosed my check made out to the Birmingham Tip-Off Club.

Or, please charge my credit card. I understand that a convenience fee of 2.9% applies.

Card Number: _____ Expiration Date: _____

3-digit CSC: _____ Billing Phone: _____

Billing Address: _____