

SGA

APPLICATION FOR ASSOCIATE MEMBERSHIP

Company Name

Address

City, State Zip

Phone

Fax

△ Associate Member - \$700

△ Associate Expanded Membership - \$2,500  
(Includes subscription to SGA Network)

Method of payment:

\_\_\_ Check enclosed

Credit Card:

\_\_\_ American Express

\_\_\_ MasterCard \_\_\_ Visa

Card Number

Name on card

Exp. Date: \_\_\_\_\_

Accredited Representative:

Name, Title, E-mail

List principal company products and/or services that apply to the gas industry:

Please check categories that apply to your company:

- \_\_\_ Gas appliances
- \_\_\_ Coatings/cathodic protection
- \_\_\_ Communications/controls/SCADA
- \_\_\_ Compressor/prime movers/components
- \_\_\_ Computers/software/IT
- \_\_\_ Construction equipment/services
- \_\_\_ Customer service/call centers
- \_\_\_ Engineering services/consultants
- \_\_\_ Environmental
- \_\_\_ Financial/management consulting

- \_\_\_ Instruments
- \_\_\_ Meters/measurement
- \_\_\_ Offshore Services
- \_\_\_ Pipe/fittings
- \_\_\_ Safety/Health products
- \_\_\_ Training/ HR/Professional development
- \_\_\_ Valves/equipment
- \_\_\_ Other - please describe