

MEMBERSHIP DUES FOR 2017

PLEASE COMPLETE THE FOLLOWING INFORMATION FOR THE PRIMARY CONTACT FOR YOUR ORGANIZATION. YOUR MEMBERSHIP FEE OF \$95.00 INCLUDES ONE COPY OF ANY CORRESPONDENCE INCLUDING THE MONTHLY MINUTES TO BE SENT TO THIS INDIVIDUAL:

COMPANY NAME: _____

PRIMARY CONTACT: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

TELEPHONE: _____

FAX NUMBER: _____

EMAIL ADDRESS: _____

NUMBER OF EMPLOYEES/MEMBERS: _____

PLEASE RETURN THIS FORM WITH YOUR CHECK PAYABLE TO PEAA.

SEND TO: CHRIS STERF

PEAA

P O BOX 17123

PITTSBURGH PA 15235-0123