

2010 Application for Membership

ASSOCIATE COMPANY CATEGORY – Any company, concern, partnership, or person engaged in supplying natural gas equipment, products, appliances, services, or in activities pertinent to the natural gas industry in the northeast states and not a gas distribution, holding and service company, or a gas transmission/LNG company. *Excerpt from bylaws*

Type or print information – no abbreviations please

Company _____

Street _____

PO Box _____

City/Town _____

State and Zip Code _____

Telephone _____

Cell _____

Fax _____

Website _____

Company Primary Individual Contact

Full Name _____

Nickname _____

Job Title _____

Street and PO Box _____

City/Town _____

State and Zip Code _____

Telephone _____

Cell _____

Fax _____

Email _____

Indicate your field of interest:

- Operations Financial /Rates Marketing Sales Gas Control Environmental
 Supply Planning and Infrastructure Training _____

Type of Company: Manufacture Products Distribute Products / Manufacturer Rep Contractor Consultant
 Other _____

List Company Products _____

List Company Services _____

Membership Dues

Full Fiscal Year: January 1, 2010 - December 31, 2010: \$350.00

Prorated Dues: Entry July 1, 2010: \$175.00 • Prorated Dues: Entry October, 1, 2010: \$87.50

Check Enclosed: \$ _____

Credit Card Payment Information

Credit Card Number: _____

Card Type: _____ CVV#: _____

Name On Card: _____

Expiration Date: ___ / ___

For Federal Income Tax purposes, membership dues and contributions to NGA are deductible as business expenses, not as charitable contributions.

The undersigned, on behalf of and duly authorized by this company, presents this application for company membership in the Northeast Gas Association, subject to approval by the Board of Directors.

Executive Signature _____

Individuals Representing Company Membership

In addition to the "Primary Company Representative" please include the following individuals on NGA's Roster

Full Name _____

Nickname _____

Job Title _____

Street and PO Box _____

City/Town _____

State and Zip Code _____

Telephone _____

Cell _____

Fax _____

Email _____

Indicate your field of interest:

- Operations Financial /Rates Marketing Sales Gas Control Environmental
- Supply Planning and Infrastructure Training _____

Full Name _____

Nickname _____

Job Title _____

Street and PO Box _____

City/Town _____

State and Zip Code _____

Telephone _____

Cell _____

Fax _____

Email _____

Indicate your field of interest:

- Operations Financial /Rates Marketing Sales Gas Control Environmental
- Supply Planning and Infrastructure Training _____

NORTHEAST GAS ASSOCIATION

75 Second Avenue, Suite 510, Needham, MA 02494 Tel: 781-455-6800 Fax: 781-455-6828
Contact: Bonnie M. Ayer, Director of Member Services