

BALDWIN COUNTY UNITED

APPLICATION FOR MEMBERSHIP

(Please type or print)

NAME: _____
(Last) (First) (Middle)

ADDRESS: (Mailing) _____

(Home, if different) _____

PHONE: _____ (Work) _____ (Home)
_____ (Fax) _____ (e-mail)

BUSINESS OR PROFESSION: _____

REFERENCES: (1) _____

(2) _____

TYPE OF MEMBERSHIP DESIRED: INDIVIDUAL (\$100 per year) _____
(Please Check One) CORPORATE (minimum \$250 per year) _____

COMMENTS: Please mark any BCU Committees listed below that you would be interested in serving on.

| | |
|---------------------------------|-------|
| EDUCATION | _____ |
| ENVISION COASTAL ALABAMA | _____ |
| GOVERNMENTAL AFFAIRS | _____ |
| GROWTH EDUCATION OUTREACH (GEO) | _____ |
| MEMBERSHIP | _____ |
| NATURAL RESOURCES/CONSERVATION | _____ |
| PUBLICITY/PUBLIC RELATIONS | _____ |
| SOCIAL SERVICES/HEALTH | _____ |

SIGNATURE OF APPLICANT: _____

DATE: _____

PLEASE MAIL COMPLETED FORM TO: Baldwin County United
P.O. Box 286
Fairhope, AL 36533

BOARD APPROVAL: _____ (Date)