



APPLICATION FOR MEMBERSHIP

I hereby apply for membership in your Club. If I should be accepted, I agree to comply with and observe the By-laws, House Rules and Regulations, and further agree that my membership will be subject to all By-laws, House Rules and Regulations now in force and those which may be legally adopted and for infraction thereof the Board of Directors may terminate such membership.

Applicant's Signature		Date		
Applicant Information (please	print clearly)			
Full Name:		Date of Birth:		
Company Name (in full):		Title:		
Company Address, City, State, Zip:				
Company Phone:		Company Email:		
Home Address, City, State, Zip:				
Phone:	Email:			
Please select where you would like billing and materials to be sent (select 1):		Company	Home	
Spouse's Name:		Spouse's Date of Birth:		
Phone:	Email:	Email:		
Alma Mater and/or Professional an	d Social Affiliations:			
Class of Membership:				
Active Individual	Senior	Junior		
Clergy	Diplomatic	Non-Resident		
Premier Company	Secondary Company	Junior Secondary Company		
MBA Program				
Primary Premier Company to be ow	ned by			
Company Transfer from				

If selected MBA Program Class of Membership please complete and initial the following:

School Name (in full):

Graduation Year:

MBA Program Title: (i.e. Full Time, Professional, Executive, Online etc.)

I am aware my monthly membership dues will be waived for 12 months from approval date. I would be required to keep a credit card on file to pay for any food and beverages charges and/or attendance of events etc. incurred during the month. At the 12-month anniversary, I have the option to continue membership by paying the current monthly dues or trial membership will end.

Initial Here

If selected Junior Class of Membership, please note and initial the following:

Any Junior Member upon reaching forty (40) years of age shall as a matter of right be entitled to all the rights and privileges of an Individual Active Member upon the payment in full of the initiation fee and/or transfer fee then required for Individual Active Membership, less all initiation fees or transfer fees theretofore paid by such Junior Member. Initial Here

Have you ever been a member of the Petroleum Club of Houston?	Yes	No
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If yes, please provide date:

I/my spouse would like to sign up for the Ladies Association. Please charge my membership account the \$35 annual dues.

Yes No

I/my spouse would like to join the Professional Women's Networking Group.

Yes No

Do you qualify for our Legacy Membership Program (parents or grandparents must be current members)?

Yes No

Recommendation of Sponsors

Sponsor Name #1

Dear Board of Trustees and Membership Committee of the Petroleum Club of Houston,

The aforenamed applicant is personally known by me to be of good character and would be an excellent Petroleum Club of Houston member. I recommend that he/she be approved for Membership.

Signature

Member Number

Additional Comments:

Sponsor Name #2

Dear Board of Trustees and Membership Committee of the Petroleum Club of Houston,

The aforenamed applicant is personally known by me to be of good character and would be an excellent Petroleum Club of Houston member. I recommend that he/she be approved for Membership.

Signature

Member Number

Additional Comments:

Note: Sponsors may provide a separate letter if appropriate

DISCLOSURE AND AUTHORIZATION

In connection with my application for membership, I UNDERSTAND THAT CONSUMER REPORTS, WHICH MAY CONTAIN PUBLIC RECORD INFORMATION, MAY BE REQUESTED BY THE ORGANIZATION FROM ASSOCIATED SERVICES EMPLOYMENT CHECK (ASEC). ASEC is a division of Associated Background Check, Inc. I FURTHER UNDERSTAND that these reports provided by ASEC may contain public record information such as my criminal records history (if any) from county, federal, state, and other agencies which maintain such records.

I AUTHORIZE WITHOUT RESERVATION, ANY PARTY OR AGENCY CONTACTED BY ASSOCIATED SERVICES TO FURNISH THE ABOVE MENTIONED INFORMATION.

I have the right to make a request to ASEC upon proper identification, to request the nature and substance of all information in its files on me at the time of my request, including the sources of information and the recipients of any reports on me which ASEC has previously furnished within the two year period preceding my request.

I HEREBY AUTHORIZE PROCUREMENT OF CONSUMER REPORT(s). If membership is approved, this authorization shall remain on file and shall serve as ongoing authorization for you to obtain consumer reports at any time during my membership period.

*PLEASE SIGN/DATE HERE, AND THEN FILL OUT THE IDENTIFICATION INFORMATION IN BOX BELOW:

APPLICANT'S SIGNATURE	DATE			
The information below is required for identification and background screening purposes only:				
SOCIAL SECURITY NUMBER	COUNTY OF RESIDENCE			
DATE OF BIRTH (mm/dd/yyyy)	OTHER LAST NAMES (INDICATE IF MAIDEN)			
CURRENT ADDRESS	PREVIOUS ADDRESS			
CITY, STATE, AND ZIP CODE	CITY, STATE, AND ZIP CODE			
PRINT NAME (First / Middle / Last)	DRIVERS LICENSE NUMBER & STATE			
ADDITIONAL FORMER RESIDENCES FOR LAST SEVEN (7) YEARS IF APPLICABLE:				
(1) CITY / STATE / ZIP	(2) CITY / STATE / ZIP			

<u>Applicants in CA, MN, OK, ME, NY:</u> You have the right to receive a copy of the consumer report. Please indicate if you would like to be furnished with one: Yes No

CREDIT CARD AUTHORIZATION FORM

CURRENT DATE:

APPLICANT'S NAM E:

MEMBER NUMBER: (office use only)

TYPEOF CARD:

CARD NUMBER:

CARD EXPIRATION DATE:

CREDIT CARD BILLING ADDRESS:

CARD HOLDER'S NAME AS IT APPEARS ON THE CARD:

CARD HOLDER'S SIGNATURE

I GUARANTEE CHARGES FOR: (check all that apply)

INITIATION FEE ONLY I authorize the Petroleum Club of Houston to charge my credit card the initiation fee in the amount of \$

INITIATION FEE & MONTHLY AUTO PAY

I authorize the Petroleum Club of Houston to charge my credit card for the initiation fee in the amount of \$ and enroll me in monthly auto pay.

MONTHLY AUTO PAY I authorize the Petroleum Club of Houston to charge my credit card and enroll me in monthly auto pay.