

5109 Hollyridge Dr. Ste. 101 Raleigh, NC 27612 Phone: 919.787.8485 Fax: 919.781.7481

2025 APPLICATION FOR OUT-OF-STATE MARKETER MEMBERSHIP

In accordance with the Articles of SEPA, I/We hereby apply for membership as an Out-Of-State Member of the Southeast Propane Alliance.

Note: Please return application and fee to the above address or email it to beverly@southeastpropane.org before January 31, 2025.

Members with no ret	TER MEMBER tail locations in NC, GA or SC who joined bugh their own state's Association.	
	TOTAL PAYMENT	\$
Signature:	Date	
Please provide:		
Company Name:		
Name:		
Mailing Address:		
Street Address:		
Business Phone:		
Fax:		
E-Mail:		
□ Credit Card Payment		□Check
Credit Card #	Exp. Date	
Signatura		

19% of your membership dues are NOT deductible as an ordinary and necessary business expense.