



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

2025 APPLICATION FOR AFFILIATE MEMBERSHIP

Wholesalers of propane gas, propane gas appliances, propane utilization and service equipment, manufacturers and producers, trucking firms and/or haulers of propane/butane gas. Persons, firms, partnerships, associations, or corporations not otherwise qualifying for membership but who are interested in the work of this Alliance.

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

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

SEPA AFFILIATE MEMBERSHIP..... \$950

TOTAL PAYMENT.....\$_____

Signature: _____ Date _____

Please provide:

Company Name:

Contact Name:

Mailing Address:

Company Street Address:

Business Phone:

Fax:

E-Mail:

Credit Card Payment

Check

Credit Card # _____ Exp. Date _____

Signature: _____

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