



# MEMBERSHIP APPLICATION

The Voice of the Permian Basin since 1961

## PLATINUM - \$2,500 Minimum

Same benefits package as Black Gold, plus:

- Exclusive input into legislative and regulatory policy decisions
- Opportunity to participate in policy making decisions and lobbying efforts
- Official PBPA portfolio binder

### HELP FIGHT LEGISLATIVE BATTLES

Inquire About Our Issue Advocacy Program  
Available to All Platinum Members

FOR MORE INFO: [brianne@pbpa.info](mailto:brianne@pbpa.info)

## BLACK GOLD - \$1,500

Same benefits package as Gold, plus:

- Membership entitlements, including voting rights, for a maximum of 10 company representatives
- Access to policymakers. Input on proposed legislation and regulation development
- Invitations to private VIP policymaker receptions
- Special recognition at PBPA events and in official PBPA publications

## GOLD - \$700

Same benefits package as Silver, plus:

- Membership entitlements, including voting rights, for a maximum of four company representatives
- Board member eligibility
- Eligible to serve on policy making committees
- Official PBPA Framed Membership plaque

## SILVER - \$350

Same benefits package as Bronze, plus:

- Membership entitlements, including voting rights, for a maximum of two company representatives
- Legislative and regulatory updates

## BRONZE - \$235

- Membership entitlements, including voting rights, for a maximum of one company representative
- Subscription to Permian Basin Oil & Gas magazine and American Oil & Gas Reporter
- E-updates on association and industry news
- Access to member-only website features, including membership directory
- Business networking opportunities with leading industry decision makers
- Official PBPA Membership certificate

Please Select Membership:  Platinum  Black Gold  Gold  Silver  Bronze

Company \_\_\_\_\_

Primary Contact Name \_\_\_\_\_

Primary Contact Email \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone/ Fax \_\_\_\_\_

To add additional company representatives to the membership, please contact our office.

### Payment Method:

\_\_\_\_ Check enclosed \_\_\_\_ Please bill me  Visa  MasterCard  AMEX Credit Card #: \_\_\_\_\_

Name of card holder: \_\_\_\_\_ Exp. date: \_\_\_\_/\_\_\_\_ Zip code: \_\_\_\_\_

### Please return form with dues to:

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