

2017-18 MEMBERSHIP RENEWAL APPLICATION

Name of Member		Spouse	
	(First, Middle, La	ast)	(First, Last)
Title	Independent □ In-House □ Years as a Landman		
Employer & Address			
Business Phone	Fax	Cell	
e-mail			
Previous Employers			
Home Address		Home Phone	
Per the Los Angeles Assoc ☐ Active Member	siation of Professional Landmen's By □ Associate Member		rary Member
Are you interested in worki ☐ Board of Directors	ng on any of the following with the La	AAPL? □ Other as needed	
Are you a member of the A Note your AAPL profession	merican Association of Professional hal designation(s) CPL #	Landmen? ☐ Yes # ☐ N _ ☐ RPL # ☐ RL #	lo □ ESA #
LANDMEN, an independ of professional Landme	dent non-profit association dedica	OS ANGELES ASSOCIATION ated to the understanding, promot their fellow workers in the petrol ear commencing July 1 st .	tion, and advancement
Date	Signature of Applicant		
For LAAPL Use Only			
Date Received:	Amount Received:	Check Number:	
Dues accepted for period:			

Please return this form along with your check payable to the Los Angeles Association of Professional Landmen [LAAPL] to:

Allison Foster, SHPI / LAAPL Membership Chair 2633 Cherry Avenue Signal Hill, CA 90755 afoster@shpi.net / 562.326.5220