



2024 Membership Form – Dues \$75

PLEASE MAIL TO ADDRESS BELOW!

Name: _____

Job Title: _____

Business Affiliation: _____

Business Address: _____ **City** _____ **Zip** _____

Bus. Phone: _____ **Cell:** _____

Professional Designations (JD,CPA,CAP,CFP): _____

E-mail Address: _____

Referred by: _____

Permission to list you in on-line members only directory (yes/no) : _____

Is there someone else you think should be invited to join SSPGC? Please share their name and organization...we will follow up!

Name	Organization	Phone#
_____	_____	_____

I AM INTERESTED IN BOARD SERVICE ___YES ___NO ___MAYBE

Complete this form and return it with your payment to:
S.S.P.G.C.
Attn: Rick Oldenburg, CAP
6825 Rainier Ave
Gig Harbor, WA 98335
Make checks payable to South Sound Planned Giving Council (SSPGC)

--FOR OFFICE USE ONLY--

Amount paid: _____ Date paid: _____

Check#: _____ Cash: _____

Accounting Gmail Directory