



# MEMBERSHIP APPLICATION

Choose one:  New Member  Renewal

First \_\_\_\_\_ Last \_\_\_\_\_ Title \_\_\_\_\_

Region:  Alamo  Central  El Paso  Gulf Coast  North Texas  Rio Grande Valley  Panhandle

Company TPSB License# \_\_\_\_\_ Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

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

Office Ph. \_\_\_\_\_ Fax \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_ Website \_\_\_\_\_

**(\* Required)**

\*Currently, how many do you employ?  <50  50-100  100-250  250-500  >500

What is your estimated annual revenue?  <\$1M  \$1M-\$3M  \$3M-5M  \$5M-\$10M  >\$10M

Are you members of other organizations?  Yes  No If yes, which ones \_\_\_\_\_

What is of greatest benefit to you? (check all that apply)  3% Workers Comp Discount  Networking  
 CE Credits  Shaping the Industry  Industry Info/Newsletter  Other \_\_\_\_\_

What additional benefits would you like to see from ASSIST? \_\_\_\_\_

**PAYMENT OF MEMBERSHIP DUES:** Dues are paid in full annually and must be submitted with this form

Voting Member \$295.00  Corporate Member \$250.00  Associate Membership \$30.00

Enclosed Payment Amount \$ \_\_\_\_\_

**Please make checks payable / mail payments to:**

**ASSIST  
Attn: Member Services  
5408 Woodway Dr  
Fort Worth, TX 76133**

I understand that ASSIST dues are paid annually and that a \$25.00 late fee will be applied to all renewing memberships submitted after 60 days from the due date.

\_\_\_\_\_  
Print Name Signature Date

If you have any questions, please contact ASSIST at (281) 667-1069 or via email at admin@assisttexas.com