



**ST. MARY  
INDUSTRIAL  
GROUP**

**MEMBERSHIP APPLICATION**

I/We hereby desire membership in the St. Mary Industrial Group as follows:

**BUSINESS OR COMPANY NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**DESIGNATED COMPANY REPRESENTATIVE** (This is considered the Member, and is the only person who will be allowed to attend the July meeting, which is closed to Members for the election of a new Board of Directors. Only one person can be listed as the Member. All others should be listed as an Additional Contact.)

**NAME:** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

**BUSINESS PHONE:** \_\_\_\_\_ **FAX #:** \_\_\_\_\_

**ADDITIONAL CONTACTS:** Other employees in your company you would like to designate to receive meeting notices and other information (Attach additional sheet if needed.)

**Name:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**ABOUT YOUR BUSINESS/TYPE OF BUSINESS:**

\_\_\_\_\_  
(Contractor, Sub-Contractor, Supplier, Service, Other)

**BRIEFLY DESCRIBE THE TYPES OF SUPPLIES, SERVICES, ETC. YOU PROVIDE:**

\_\_\_\_\_  
\_\_\_\_\_

I/We declare that the total number of employees is \_\_\_\_\_ and a check in the amount of \$ \_\_\_\_\_ is attached.

**SIGNATURE:** \_\_\_\_\_

**Please return this form with your check**

Payable to: St. Mary Industrial Group  
P. O. Box 1447  
Morgan City, La. 70381

**Dues Structure:**

1 to 20 Employees	\$150.00
21 to 100 Employees	\$300.00
101 or more Employees	\$500.00