

Membership Application

South Plains Chapter of the American Payroll Association

Name: _____

Title: _____

Organization: _____

Address: _____

City: _____

State: _____ **Zip:** _____

Email: _____

Annual Member: \$35.00

APA ID: _____

Non APA Member: \$45.00

Please bring Membership dues to the November Luncheon.

Please make checks payable to:

SPC APA

You may mail them before the November meeting to:

Jill Axton

7830 Orlando Avenue

Lubbock, TX, 79423

Or, you may request to pay by electronic payment to:

spcapa2018@gmail.com

Interests:

- Study Group for Certifications
- Networking
- Newsletter Updates
- Presentations
- Membership Drive
- Committee Member
- Sponsorship Program

Topics for Upcoming Meetings:
(Give us your ideas!)

Additional Comments:

