



NCPBL Professional Division-Foundation, Inc. Membership Application Form

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|---|--|--------------------------|------------------------|--------------------------|-----------------------|
| Electronic Option | Go to www.fbla-pbl.org and pay dues at national website. Send an email with form to membership@ncpblpdfoundation.org | | | | |
| Membership Name: | | | | | |
| Chapter Affiliation: | | | | | |
| Email Address: | | | | | |
| Personal Information: | | | | | |
| Address: | | | | | |
| Contact Number: | | | | | |
| Business Information: | | | | | |
| Company: | | | | | |
| Position and contact number | | | | | |
| Membership Information: <i>(please select all that apply)</i> | | | | | |
| <input type="checkbox"/> | New Member | <input type="checkbox"/> | Returning Member | <input type="checkbox"/> | Business Person |
| <input type="checkbox"/> | Former FLBA Member | <input type="checkbox"/> | Former PBL Member | <input type="checkbox"/> | Local Chapter Adviser |
| NC Phi Beta Lambda Professional Division-Foundation, Inc. Member Since: | | | | | |
| Directory Information: <i>(please select all that apply)</i> | | | | | |
| <input type="checkbox"/> | Speaker Directory | Topic(s): | | | |
| <input type="checkbox"/> | Member Directory <i>(please select information to include)</i> | <input type="checkbox"/> | Name | <input type="checkbox"/> | School |
| <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | Email |
| Dues Information: | Dues are \$25.00 per membership year | | | | |
| Membership Form Mailing Address: | NC Phi Beta Lambda Professional Division-Foundation, Inc. c/o Melissa Coffey 241 Heritage Place, Mooresville, NC 28115 | | | | |
| Received Date: | | | Membership Entry Date: | | |