

**MISSISSIPPI ASSOCIATION OF PETROLEUM LANDMEN**

**P. O. Box 907**

**JACKSON, MISSISSIPPI 39205**

**APPLICATION FOR MEMBERSHIP**

DATE: \_\_\_\_\_

I, \_\_\_\_\_, hereby request membership in the Mississippi Association of Petroleum Landmen an \_\_\_\_\_ Active \_\_\_\_\_ Associate Member.

I am currently employed by \_\_\_\_\_

and my business address is \_\_\_\_\_

My present title is \_\_\_\_\_ and I have served in this capacity for \_\_\_\_\_ year(s) in Mississippi and/or \_\_\_\_\_

I (am, am not) requesting reinstatement as a member. My last year of membership being \_\_\_\_\_.

I (am, am not) a member of AAPL. Please circle any appropriate title: RLP CPL CPL/ESA

I have read the by-laws of the MAPL and agree to be governed by these by-laws.

SIGNED \_\_\_\_\_

Please complete all of the following information that you would like to appear in the directory:

MAILING ADDRESS:

\_\_\_\_\_ PHONE \_\_\_\_\_

\_\_\_\_\_ FAX \_\_\_\_\_

\_\_\_\_\_ E-MAIL \_\_\_\_\_

I want my newsletter to be sent to me by: \_\_\_\_\_ Regular mail \_\_\_\_\_ E-mail

## SPONSORS

*I am currently an Active member of the MAPL and I recommend the above applicant for membership in the Association. I understand that the Membership Committee of MAPL may request that I furnish additional information regarding the applicant.*

\_\_\_\_\_ I have known the Applicant for \_\_\_\_\_ year(s).

\_\_\_\_\_ I have known the Applicant for \_\_\_\_\_ year(s).

**SPONSORS WILL SIGN ON THE LINE INDICATED AND PRINT OR TYPE THEIR NAME UNDERNEATH.**

PLEASE COMPLETE ALL OF THE INFORMATION REQUESTED, AND AFTER SIGNING AND HAVING TWO (OR ONE MEMBER WHO IS ALSO A CPL) ACTIVE MEMBERS OF THE ASSOCIATION SIGN AS SPONSORS, RETURN THE COMPLETED FORM TO:

SECRETARY OF MAPL  
P. O. BOX 907  
JACKSON, MS 39205

PLEASE REMIT A CHECK IN THE AMOUNT OF \$50.00 PAYABLE TO MAPL WHEN SUBMITTING THIS APPLICATION.