

Great Falls Advertising Federation

Membership Application



Name _____

Title _____

Company _____

Address _____

City _____

State/Zip _____

Work Phone _____

Home Phone _____

Cell Phone _____

Fax _____

Email _____

Date of Birth _____ (month/day)

Name & Company as it should
appear on your name badge

Name _____

Company _____

Transfers:

Transferring from:

(Member name & Company name)

Transferring to:

(Member name & Company name)

Membership Fee:

Resident \$215

Non-Resident \$100

Mail application and check to:

GFAF

PO Box 634

Great Falls, MT 59403

Applicant's Signature

Date

Proposed by: _____

(must be signed by a current Ad Club member)

Community Involvement: _____

Reason for joining Ad Club: _____

How did you hear about Ad Club? _____