



Membership Form 2011



COMPANY INFORMATION

Please select all that apply: New HPCG of Oregon Member New Efficiency First Member

Company Name _____

Street _____

City _____ State _____ Zip _____ # Of Employees _____

Website _____

Primary Contact

First Name _____ Last Name _____

Work Phone _____ Mobile Phone _____

Email _____

Secondary Contact

First Name _____ Last Name _____

Work Phone _____ Mobile Phone _____

Email _____

The company's primary business is:

MEMBERSHIP LEVEL:

Full Member	<input type="checkbox"/> BPI / HPwES
\$500/year	<input type="checkbox"/> non - BPI / HPwES

Allied Supporter
<input type="checkbox"/> \$250/year

Individual
<input type="checkbox"/> \$100/year

SPONSOR*	Bronze	Silver	Gold	Platinum
	\$1,000-\$2,499	\$2,500-\$4,999	\$5,000-\$9,999	\$10,000 +

***SPONSORS:** Contact us for more details

DONORS: Contact us to donate

NOTES:

- Dues for membership renewals are due no later than February 15th
- All membership dues are for a calendar year and may not be pro-rated

Please complete this form and return to:

HPCG of Oregon, PO Box 42290, Portland, OR, 97242

Make Check Out To: HPCG of Oregon

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