PORTS OF PHILADELPHIA MARITIME SOCIETY

CORPORATE APPLICATION FOR MEMBERSHIP

P. O. Box 1374, Linwood, PA 19061 www.portsofphilamaritimesociety.com

We,	wish to make application/ and or renew ou		
Corporate Membership in the Hundred Dollars (\$100.00) in p			•
Names of Up To Five Company I	Employees as Members	5:	
<u>Name</u>	Title/Position		<u>Email</u>
*			
<u> </u>			
* Primary Company Member			
Cornerate Mailing Address			
Corporate Mailing Address	Address		
City		State	Zip Code
City			•
*Primary Member Contact Telephone		FA.	X
If elected to membership, our fi	irm and its employees	will abide	by the By-Laws of the Society
Signature of Applicant			Date
I hereby certify that the appl	licant is of good char	acter and	reputation and worthy of
Membership in the Ports of Phi	ladelphia Maritime Soc	ciety.	
	COMPANY or		
PROPOSER:	ADDRESS:		
The Membership Committee a	advances this applicat	tion for m	embership in the Ports of
Philadelphia Maritime Society.			
Committee Chair	Data		
Committee Chall	Date		
Board Approval	Date		