PORTS OF PHILADELPHIA MARITIME SOCIETY

CORPORATE APPLICATION FOR MEMBERSHIP

P. O. Box 181, Pennsauken, NJ 08110 www.portsofphilamaritimesociety.com

We,		wish to make	e application f	for Corporate	
Membership in the Ports Fifty Dollars (\$150.00) in pay			and enclose	One Hundred	
Names of Up To Five Compan	y Employees as Membe	ers:			
Name <u>Title/Position</u>			<u>Email</u>		
*					
* Primary Company Member					
Corporate Mailing Address	Address				
City		State	Zip Code		
Main Office Telephone		FAX			
*Primary Member Contact Telepho	one				
If elected to membership, ou	r firm and its employee	s will abide b	y the By-Laws	of the Society	
Signature of A		Date			
I hereby certify that the ap	oplicant is of good ch	aracter and	reputation and	d worthy of	
Membership in the Ports of P	Philadelphia Maritime S	ociety.			
	COMPANY or				
PROPOSER:	ADDRESS:				
The Membership Committee		ation for me	mbership in t	the Ports of	
Philadelphia Maritime Societ	ly.				
Committee Chair	Date				
Board Approval	Date				