



PETROLEUM CLUB
BILLINGS

To The Secretary,

I, _____, would like to join **THE BILLINGS PETROLEUM CLUB**, a Montana nonprofit corporation serving the business community of Billings and the Rocky Mountain region. If accepted as a member, I will comply with the current bylaws and other rules and regulations of the Club, and those that may be adopted by the board of directors.

I agree to pay all membership fees, dues and minimum charges as adopted for membership, and upon my failure to do so, I understand that my membership is subject to suspension, cancellation or other action as prescribed by the bylaws of the Club.

I further agree that the Club shall not be liable for any claim that may arise from any act of mine or my invited guests, accidental or otherwise, which may result from my membership or while exercising my privileges of membership, unless otherwise provided in the bylaws.

Name _____ Date of Birth _____ Spouse's Name _____

Company _____ Occupation/Title _____

Officer Names (*Corporate Members*) _____

Home Address _____ City _____ State _____ Zip _____

Business Address _____ City _____ State _____ Zip _____

Preferred Mailing Address (*check one*) ☐ Home ☐ Business

Home Telephone Number _____ Email Address _____

Fax Number _____ Business Telephone Number _____

MEMBERSHIP DUES (*check one*):

☐ **Lifetime Member** \$7,200 / one-time payment

☐ **Platinum Member** \$1,800 / per year

- One year membership to Yellowstone Art Museum
- \$150 Gift Certificate to Alberta Bair Theater
- \$150 Gift Certificate to Billings Symphony Orchestra
- \$135 Gift Certificate to Billings Studio Theater
- \$45 per month towards a membership at YMCA
- \$25 Gift Certificate to Lilac Restaurant

☐ **Corporate Member*** \$105 / per month
includes up to four officers of the business. all additional employees may sign up as associate members \$25 / per month

☐ **Associate Member*** \$25 / per month

☐ **Resident Member** \$60 / per month

☐ **Non-Resident Member** (*residing outside of Yellowstone County*) \$300 / per year

☐ **Senior Member** (*over 70 years*) \$40 / per month

☐ **Junior Member** (*under 35 years*) \$30 / per month

All membership levels, excluding Non-Resident & Lifetime, are subject to a \$150 quarterly minimum.

Continue application on reverse side >>

AUTO PAY (Autopays will be charged to your listed credit card the 15th of every month.)

Credit Card # _____ Expiration Date _____ Billing Zip Code _____

Signature _____ Date _____

*Officer of company _____ Date _____

(must sign for Company or Associate Memberships)

Attached is my payment in the amount of \$ _____ for the first month of dues.

For more information, please email us at: info@billingspetroleumclub.com

To help us serve you better, please check all interests that apply to you:

- | | |
|---|---|
| <input type="checkbox"/> Lunch/Dinner Service | <input type="checkbox"/> Holiday Buffets |
| <input type="checkbox"/> Live Music/Dinner Dances | <input type="checkbox"/> Business Presentations/Trainings |
| <input type="checkbox"/> Wine Tasting | <input type="checkbox"/> Business Lunches/Dinners |
| <input type="checkbox"/> Gourmet Dinners | <input type="checkbox"/> Private Parties (Birthday, Anniversary, Holiday, etc.) |
| <input type="checkbox"/> Cooking Classes | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Sports Nights | _____ |

FOR OFFICE USE ONLY

Member # _____ Date Received _____ Received By _____

Payment Type _____ Amount _____



PETROLEUM CLUB
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BILLINGSPETROLEUMCLUB.COM