



JOBBER MEMBERSHIP DUES INVOICE

- BPAMA dues are valid for one calendar year: January – December. Payment is due by February 15th.
- Participation in BPAMA boards, committees, meetings, Convention and Business Expo is by membership only.
- Please indicate membership category, based upon light oil volume, by checking the appropriate category below.
- Light oil volume includes all BP gasoline, No. 1 & No. 2 fuel oils.

BP JOBBERSHIP INFORMATION

Company Name:		
Principal Contact:		
Physical address:		
City:	State:	ZIP Code:
PO Box:	City:	ZIP Code:
E-mail:	Phone:	Fax:
Name of your BP Business Development Manager (BDM):		
Multi-branded:	Yes No	Brands represented in addition to BP:
Dues Invoice should be sent to following: <input type="checkbox"/> Same as above <input type="checkbox"/> Billing Contact Name:		
Billing Contact Email:		Billing Contact Phone:

BPAMA MEMBERSHIP CATEGORIES

<input type="checkbox"/> Members whose light oil volume is less than 10 million gallons	\$950
<input type="checkbox"/> Members whose light oil volume is between 10 – 20 million gallons	\$1,400
<input type="checkbox"/> Members whose light oil volume is between 20 – 30 million gallons	\$1,650
<input type="checkbox"/> Members whose light oil volume is between 30 – 40 million gallons	\$1,900
<input type="checkbox"/> Members whose light oil volume is between 40 – 50 million gallons	\$2,300
<input type="checkbox"/> Members whose light oil volume is between 50 – 75 million gallons	\$2,850
<input type="checkbox"/> Members whose light oil volume is between 75 – 100 million gallons	\$2,950
<input type="checkbox"/> Members whose light oil volume is between 100 – 200 million gallons	\$3,400
<input type="checkbox"/> Members whose light oil volume is greater than 200 million gallons	\$3,750

METHOD OF PAYMENT

<input type="checkbox"/> Check Payable to BPAMA; Mailed to: 4 Skidaway Village Square, Suite 201, Savannah, GA 31411		
<input type="checkbox"/> MasterCard	CC #	
<input type="checkbox"/> Visa	Exp:	
<input type="checkbox"/> American Express	CVW:	
Name as it appears on Card:		
Billing Address for Credit Card: Same as above: <input type="checkbox"/>		
City:	State:	ZIP Code:
E-mail for receipt:		

Taxpayer Name: BP Amoco Marketers Association, Inc.

Taxpayer ID Number: 62-0917531; BPAMA is a not-for-profit 501-6(C). Dues may be deductible.

4 SKIDAWAY VILLAGE SQUARE, SUITE 201 SAVANNAH, GA 31411 (912) 598-7939 WWW.BPAMA.COM