Application for EPCE Membership

Description of the Organization: Number of Employees:	Company/organization:				
Contact Name:	Address:		City:	State: _	Zip:
Number of Employees:	Telephone:		Website:		
Address: City: State: Zip:	Description of the Organization	ation:			
Annual Membership Fee: Annual membership Fees are based on the number of employees in the organization. See chart below. Membership Level	Number of Employees:				
Telephone:	Contact Name:		Title:		
Annual Membership Fee: Annual membership fees are based on the number of employees in the organization. See chart below. Membership Level	Address:		City:	_State:	Zip:
Annual membership fees are based on the number of employees in the organization. See chart below. Membership Level	Telephone:		Fax:		
Utility Member (# of employees)	Email:				
Utility Member			r of employees in the organiza	tion. See cl	hart below.
Utility Member	Membership Level	1			Annual Membership Fe
Utility Member	Utility Member	that applies			(based on # of employees
3,000 to 10,000 employees \$7,200 annually \$12,000 annually \$12					\$3,600 annually
Industry Association					
Industry Association Member (National, Regional, State) 100 to 500 employees \$1,700 annually			10,000 and over employees		\$12,000 annually
Member (National, Regional, State)					
Regional, State) Solution Comparisor					
Union Joint Labor Management Programs Professional Organizations					-
Union Joint Labor Management Programs Professional Organizations	Regional, State)		500 and over employees		\$3,600 annually
Management Programs Professional Organizations 1,000 to 5,000 employees \$660 annually \$1020 annually \$10,000 and over employees \$1020 annually \$10,000 and over employees \$1,440 annually \$10,000 and over employees \$1,440 annually \$10,000 and over employees \$1,200 annually \$1,200 annually \$1,500 to 1,500 \$1,800 annually \$1,500 to 3,000 \$3,600 annually \$1,500 to 3,000 \$3,600 annually \$1,000 and over \$1,000 and over \$1,500 annually \$1,000 and over \$1,500 annually \$1,000 and over \$1,000 annually \$1,				ırly)	
Professional Organizations					•
Affiliate Member (vendors, suppliers, contractors, other firms)					
Affiliate Member (vendors, suppliers, contractors, other firms)	Professional Organizations				1 '
Affiliate Member (vendors, suppliers, contractors, other firms) Solution 1,500 to 1,500 \$1,800 annually \$1,500 to 3,000 \$3,600 annually \$3,000 to 10,000 \$6.000 annually \$7,500 annually \$7,500 annually \$1,000 and over \$1,000 and over \$1,000 annually \$1,000 and over \$1,000 annually \$1,000 and over \$1,000 annually \$1,000 annually \$1,000 and over \$1,000 annually \$1,000 annually \$1,000 annually \$1,000 and over \$1,000 annually \$1,000 a			7 1		\$1,440 annually
suppliers, contractors, other firms)					
firms) 1,500 to 3,000 \$3,600 annually \$6.000 annually \$7,500 annually \$7,500 annually \$7,500 annually \$1,000 and over \$7,500 annually \$1,000 and over \$1,500 annually \$1,000 and over \$1,500 annually \$1,000 and over \$1,500 annually \$1,500 annually \$1,500 annually \$1,500 annually \$1,000 and over \$1,500 annually \$1,					
Authorization: I authorize this Energy Providers Coalition for Education ("EPCE") membership request for the above-named organization. I "Member" acknowledge the Council for Adult and Experiential Learning ("CAEL") as its agent for purposes of carrying out the duties and responsibilities of EPCE. Authorized Signature: Date: Title: Please send completed form to:					
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Title:	I authorize this Energy Providers organization. I "Member" acknown	wledge the Coun	cil for Adult and Experiential		
Title:	Authorized Signature			Data	
Please send completed form to:				Date	
EUCE Mombardhin Angio Lugar	Please send completed form to:				
	Email: alucas@cael.org				

Strada Collaborative, Inc., d/b/a CAEL 10 W. Market St.

Suite 1100 Indianapolis IN 46204

United States

For Electronic Payment:

If you wish to pay via Credit Card, please call 317-806-1241