



PENNSYLVANIA COUNCIL OF PROFESSIONAL GEOLOGISTS

116 Forest Drive
Camp Hill, PA 17011
Phone: 717-730-9745
www.pcpog.org

CORPORATE MEMBERSHIP RENEWAL

A sole proprietorship or a private or public company that employs two or more Professional Geologists and/or professionals with a natural science or engineering degree involved in geological or environmental work. A Corporate Member must identify by name the specific individuals it wishes to include under its Corporate Membership. Annual dues are discounted as shown below:

Professionals	Discount	Dues/Individual
Sole Proprietor	0%	\$150
2-5	5%	\$143
6-10	10%	\$135
11-15	15%	\$128
16-20	20%	\$120
≥21	25%	\$113

Only those professionals identified on this application will receive the benefits of membership including voting privileges and discounts.

REMINDER: *Corporate memberships cannot be renewed online.*

List by name all individuals your company is enrolling to receive the benefits of PCPG membership. All those enrolled in this area and included in corporate dues payment will receive announcements and communications via email. PLEASE PRINT CLEARLY. Make necessary changes. The name indicated on the first line will be the primary contact for the corporate membership.

PCPG Corporate Member Company: _____

Professionals to be Enrolled

Email Address

- 1.
- 2.
- 3.
- 4.

Professionals to be Enrolled

Email Address

5.

6.

7.

8.

9.

(Add more pages if necessary)

Rate **per Professional** (chart on page 1) \$ _____

Total Professionals Enrolled _____

Balance Due \$ _____

Payment Options

Pay by Check

Make checks payable to PCPG. Please return all pages with payment to:

PCPG
116 Forest Drive
Camp Hill, PA 17011

Pay by Credit Card: Two options

Option 1. Telephone PCPG and make a credit card payment by phone: (717) 730-9745

-continued on next page-

Pay by Credit Card:

Option 2. Complete this form **including** the lower portion, and send via USPS to:

PCPG
116 Forest Drive
Camp Hill, PA 17011

\$ _____ Total Amount _____ Visa _____ Master Card _____ American Express

Credit Card Number _____ Exp. Date _____ CVV _____

Name on Credit Card _____

Billing Address of Credit Card Statement _____

Credit Card Holder's Telephone Number _____

Cardholder Signature: _____

A credit card receipt will be sent to the primary contact's email address.

Questions? Telephone PCPG by dialing (717) 730-9745.