

Name: _____ Birthday: _____ / _____
(First) (Middle Initial) (Last) (Month / Day)

Help us out, how did you hear about PBX? Please be specific and list all sources: _____

Business Information

Company Name: _____ Position/Title: _____
Company Address: _____ No. Employees: _____
City: _____ State: _____ Zip: _____ Phone: () - _____
Cell Phone: () - _____ Email Address: _____
Industry: _____ Website: _____
Brief description of Company/Business: _____

1 Membership Type (check one)

- Individual** US \$225.00
Includes a one-year PBX membership
- Non for Profit 501(c)3** US \$399.00
Includes a one-year PBX membership and up to 10 employees
- Business (1 – 10 employees)** US \$499.00
Includes a one-year PBX membership and up to 10 employees
- Corporate (11 – 50 employees)** US \$599.00
Includes a one-year PBX membership and up to 50 employees
- Corporate (51 – 250 employees)** US \$799.00
Includes a one-year PBX membership and up to 250 employees
- Corporate (251 - 1000 employees)** US \$999.00
Includes a one-year PBX membership and up to 1,000 employees
- Corporate (1000+ employees)** US \$1,499.00
Includes a one-year PBX membership and unlimited employees
- New Member/Admin Fee** US \$50.00
One-time fee paid by all new members (not optional)

Note: Business and corporate memberships do not extend benefits to (a) multiple locations, i.e. bank branches etc., or (b) multiple businesses under one ownership. Please call (412)265-2315 for questions and/or other options.

After your application is received, reviewed, and accepted - you will be given access to your online account and the membership directory. There you will be able to edit your profile, upload your company logo, and/or upload your professional photo.

If you select a membership representing more than one employee, you will be able to add additional bundle members to your membership online when your online account becomes live. You will be notified via e-mail.

What are your expectations for joining PBX?:

- 2 Please add total of item and fee **Total:** _____
- * **OPTIONAL: 2-Year Membership. Total of one line item multiplied by two**
This will waive the \$50 New Member/Admin Fee and include a 24-month membership

Interests: Exhibitor/Vendor table(s) at Events Offering Discounts/Member Benefits Event Sponsorship/Speaking Rights Annual Golf Outing
 Membership Committee Member Ambassadorship Advertising Volunteering Breakfast Briefings Lunch & Learn Series
 Host an Event Executive Speaker Series Wine Tasting Beer Tasting Cigar Series Scotch Tasting Clay Shooting
 Afterhours Events Monthly Networking Events Corporate Tours Women in Leadership Government Affairs
 Social Media Summit Small Business Energy Health Care Other: _____

Payment Method Credit Card Check Enclosed (Make payable to: PBX, LLC)

Visa Master Card Discover American Express

Card Number: _____ Exp. Date: _____ / _____
Name on Card: _____ CVV: (on back of card) _____
Billing Address: _____
City: _____ State: _____ Zip Code: _____ Billing Phone: () - _____

Auto Renewal Option:

By checking this box, I authorize PBX to automatically renew my annual membership and to charge the provided credit card. I understand and agree that I am responsible to notify PBX before the renewal date if (a) I do not wish to renew (b) my credit card information has changed. Renewals are 365 days after the day of application submission.

I hereby declare that the above information is true to the best of my knowledge and belief, accurate and up-to-date. I have read the online **PBX Membership Agreement and Release** and agree to its terms, and I also certify that I am 21 years of age or older.

Applicant's Signature: X _____ Date: _____

Application Review (to be completed by PBX)

Reviewer: _____ Date: _____
Approved: Yes No
Comments: _____