



APPLICATION FOR MEMBERSHIP

In consideration of election as a member, the undersigned agrees to abide by the bylaws and any amendments thereto of the Tennessee Mining Association and by any resolutions of its Board of Directors.

Company Name: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Mailing Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Company Website: _____

Designated Representative: _____

Title: _____

Phone: _____ **Secondary Phone:** _____ **Fax:** _____

Email: _____

Alternative Representative: _____

Title: _____

Phone: _____ **Secondary Phone:** _____ **Fax:** _____

Email: _____

Primary business focus: _____

Number of Employees in Tennessee: _____

Preferred method of communication: email phone newsletter

TMA is a chartered, non-profit organization for the sensible utilization and promotion of our bountiful land and mineral resources for the benefit of all citizens of the state of Tennessee.