

Affiliate Member Application

DATE: _____

Company Name _____

DBA _____

Affiliate Member Name _____

Office Address _____

City/State/Zip _____

Office Phone _____

Cellphone _____

Primary Phone _____

Supra E Key Access **YES** **NO**

Home Address _____

E-Mail _____

Website Address _____

Type of Business _____

Signature _____

D.R.E./NRDS _____

4045 E Ramon Rd, Palm Springs CA 92264

(760) 320-6885

Individual membership is required of all company employees to attend GPSR meetings and functions.