Greater Memphis Employee Benefits Council (GMEBC) Application for Membership 2019 - 2020



I hereby make / renew application for membership in the Greater Memphis Employee Benefits Council. If accepted as a member, I agree to participate fully in Council activities, to attend all Council meetings, whenever possible, and to serve on official committees, if so requested. The following data is submitted for your consideration.

	Renew	
Name:		Title:
Mailing Address:		
Business Phone:		
Email Address:		
Γ		
Present Employer:		Years of employment:
Number of local employees for which	~.	Number of nationwide employees for which
your company is responsible for benef	ills:	your company is responsible for benefits:
NA		the second section of the sect
My present duties and responsibilities	with respect to employee benefit p	ians may be summarized as follows:
List apvana you think would be interest	etad in becoming a member of CMI	
List anyone you think would be interes	-	
Name:		Work Telephone:
List one topic you would be interested	d in hearing about over the course	of the upcoming year.
Signature:		Date:
Signature.		
Attach your initial dues check for \$200	0.00, payable to "Greater Memphis	Employee Benefits Council", to this application. Dues include
costs of bi-monthly meetings for the pi	rogram year September 2019 – Jul	y 2020. If you are a new applicant, you will be notified in writing
regarding the decision on your applica	tion following the next bi-monthly n	neeting of the Executive Committee.
Doturn this application, with dues to	GMEBC	
Return this application, with dues to:	P.O. Box 17015	
	Memphis, TN 38187-0015	Referred by