

THE EXECUTIVES' ASSOCIATION OF SAN DIEGO

MEMBERSHIP PROPOSAL – ASSOCIATE EXECUTIVES

NAME _____ NICKNAME _____

FIRM NAME _____

FIRM'S CLASSIFICATION _____

ADDRESS _____ ZIP CODE _____

CITY _____ PHONE _____ FAX _____ E MAIL _____

CELLULAR PHONE NUMBER _____

TITLE OR POSITION _____ LENGTH OF TIME WITH THE FIRM _____

WOULD ATTENDANCE AT MEETINGS AND/OR CONCENTRATIONS A PROBLEM? _____

PERSONAL DATA

HOME ADDRESS _____ ZIP CODE _____

CITY _____ STATE _____ HOME PHONE _____

BIRTHDAY _____

SPOUSE'S NAME _____

OTHER INFORMATION, WHICH MAY BE OF INTEREST: -

PROPOSED BY _____

DATE _____

Please return this Membership Proposal to:
The Executives' Association of San Diego
P.O. Box 128184
San Diego, CA 92101
Phone and fax: 619-255-4534
Email: execassoc@cox.net