

**Greater Lafayette Area**

**Safety Council**

P.O. Box 5674

Lafayette, IN 47903-5674

**2024 INVOICE**

**MEMBERSHIP APPLICATION AND RENEWAL FORM**

**COMPANY NAME**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**COMPANY ADDRESS**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CITY:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**STATE**: \_\_\_\_\_\_\_\_\_\_ **ZIP:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NUMBER OF EMPLOYEES:** \_\_\_\_\_\_\_\_\_\_\_\_

**COMPANY REPRESENTATIVE**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TELEPHONE NUMBER**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**FAX NUMBER**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EMAIL ADDRESS**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***2024 GLASC Annual Dues $75.00 (Companies with 99 or less Employees)***

***2024 GLASC Annual Dues $100.00 (Companies with 100 or more Employees)***

**CHECKS PAYABLE TO**:

*GREATER LAFAYETTE AREA SAFETY COUNCIL* (Remit to address above)

**CREDIT CARD INFORMATION**:

***\*Note:***

*A 3.5% + 0.15 processing fee is charged for e-mailed invoices & to manually type in the card #’s for all credit card transactions.*

* *$77.88 or $103.78*

*The rate is 2.60% + 0.10 if you have the card in hand and swipe with the card reader.*

* *$77.10 or $102.77*

**TYPE:** AMEX MASTERCARD VISA DISCOVER

**NAME ON CARD:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NUMBER:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EXP. DATE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **CVV:** \_\_\_\_\_\_\_\_\_\_\_\_

**ZIP CODE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please indicate if you are a new member:

\_\_\_\_Yes \_\_\_\_No  
If yes, please indicate who you were referred by if any:  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Qr code

Description automatically generated 100+  1-99 [www.glasc.org](http://glasc.wordpress.com)