

TULSA EXECUTIVE EXCHANGE

Membership Application & Information for TEE Directory

NAME _____ DATE _____

HOME ADDRESS _____ CITY _____

ST _____ ZIP CODE _____ HOME PHONE _____

ARE YOU A MEMBER OF ANY OTHER NETWORKING ORGANIZATION? YES _____ NO _____

COMPANY NAME _____ BUSINESS PHONE _____

BUSINESS ADDRESS _____ CITY _____

ST _____ ZIP CODE _____ FAX _____ CELL _____

EMAIL _____

WITH THIS COMPANY SINCE (DATE) _____

OWNERSHIP STATUS _____

TITLE _____

RESPONSIBILITIES _____

LIST AND DESCRIBE ALL AREAS OF YOUR CAREER YOU WISH TO REPRESENT TO TEE:

WHAT DO YOU WANT OTHERS IN THIS ORGANIZATION TO KNOW ABOUT YOUR BUSINESS:

BIRTHDAY _____

SPECIAL INTERESTS _____

PREVIOUS EMPLOYER _____

POSITION / TITLE _____

EMPLOYED FROM _____ TO _____

EDUCATION

INSTITUTION _____ FROM _____ TO _____

DEGREE OBTAINED _____

PROFESSIONAL REFERENCES

NAME _____ PHONE _____

ADDRESS _____ CITY _____ ST _____ ZIP CODE _____

NAME _____ PHONE _____

ADDRESS _____ CITY _____ ST _____ ZIP CODE _____

NAME _____ PHONE _____

ADDRESS _____ CITY _____ ST _____ ZIP CODE _____

CIVIC COMMUNITY INVOLVEMENT

ORGANIZATION _____

FUNCTION / OFFICE _____

SPONSORED BY _____

IF YOU HAVE SPECIAL CIRCUMSTANCES WHICH WOULD PRECLUDE YOUR REGULAR ATTENDANCE MEETING, PLEASE EXPLAIN:

