



MEMBERSHIP APPLICATION

MICHIGAN ASSOCIATION OF PROFESSIONAL LANDMEN

Annual Membership Dues \$45.00

Make Check payable to: MAPL, P.O. Box 1429, Traverse City, Michigan 49685-1429

Applicant Information

Full Name: _____ Business Phone: _____
 Spouse's Name: _____ Cell Phone: _____
 Mailing Address: _____ Do you wish to have your cell phone published
 in the directory? Yes No

 Fax: _____
 Company Name _____ Email: _____
 or Independent: _____

Applicant Affiliations

- AAPL Active ESA
 AAPL Associate MOGA
 CPL IRWA Designations: _____
 RPL MI BAR
 RL Other : _____
 AAPL #: _____

Membership Status

- Active Membership:** Those individuals functioning as a land professional regularly engaged in landwork related to the exploration development and production of oil and gas and other natural mineral and energy resources. An Active member shall have a minimum of four years of landwork experience or a four year college degree and must be an Active Member in good standing of the American Association of Professional Landmen (AAPL).
- General Membership:** Those individuals functioning as a land professional regularly engaged in landwork related to the exploration development and production of oil and gas and other natural mineral and energy resources. A General member shall have a minimum of two years of landwork experience and the recommendation of at least two Active Members of the MAPL who know the applicant (Sponsorship). Those individuals who are functioning as supervisors or managers of land professionals and engaged in landwork shall also be eligible for General Membership. General members shall have all rights that an Active Member has except that of voting on matters pertaining in any manner to the relationship between MAPL and AAPL.
- Associate Membership:** Persons in the oil and gas industry who are directly and regularly engaged in or associated with petroleum landwork relating to oil, gas, mineral and/or energy industries. Associate members shall have all rights than an Active or General Member has except that of voting and holding office, membership on the Board of Directors or chairmanship of any committee.

Sponsorship

Name of Sponsor: _____ Name of Sponsor: _____
 Telephone No.: _____ Telephone No.: _____
 Signature: _____ Dated: _____ Signature: _____ Dated: _____

Please accept my application for membership in the Michigan Association of Professional Landmen under the classification of membership I have checked above. I agree to be governed by the Constitution and By-laws of the Association.

Applicant's Signature: _____ Date: _____