



880 Corporate Drive, # 101, Lexington, Kentucky 40503 • 859-233-4743

APPLICATION FOR ASSOCIATE MEMBERSHIP

APPLICANT NAME: _____

The above ____ individual; ____ partnership; ____ corporation; desires to become an Associate Member of Kentucky Coal Association, Inc., as provided for in the Constitution and By-Laws, as amended. We hereby agree to pay the dues as determined by the Association's Board of Directors for the period during which we maintain our membership.

We estimate that our annual dues will amount to approximately \$_____.
(please estimate)

Our firm is connected to the coal industry of Kentucky by virtue of being involved in _____

(Please outline briefly in the space above the principal activities of your firm which relate to the coal industry of Kentucky.)

PRINCIPAL OFFICERS OR OWNERS: (Check if to receive bulletins)

Name & Title

Mailing Address & e-mail address

KEY CONTACT: (Main person in our firm to be contacted on Association matters)

Name _____ Title _____

Address: _____

City, State, Zip: _____

Telephones: Business (____) _____ Cell (____) _____

E-mail address: _____

Web address: _____

BILLING ADDRESS IF DIFFERENT THAN ABOVE:

Address _____

City, State, Zip: _____

Applicant: _____

Signature: _____

Title: _____

Date: _____

NEWSLETTERS: The following members of our firm are to receive KCA General and Legislative Bulletins: (*List below giving name, title, and mailing address, including street or box, city, state and zip, phone numbers and e-mail addresses.*)