TIMBER
PROFESSIONALS COOPERATIVE

Membership Application and 2021 Dues

Company Name Contact Name

Address City/State/Zip

County

Home Phone Work Phone

Cell Phone Fax

Email

Paying by credit card: ____Visa ____Mastercard ____ American Express

Name as it appears on card: _____

Company name on card: _____

Credit card number: _____

CVC code: _____ Exp. Date: _____

Date: _____

I,_____ authorize Timber Professionals Cooperative to charge my credit card the amount of $250.00 for the membership fee and 2021 Membership Dues.

Paying by check: Check #_____

Please return application one-time membership
equity payment and 2021 dues of $250.00 to:
Timber Professionals Cooperative (TPC)
337 Superior Avenue, Crystal Falls, MI 49920
(906) 875-3720
Fax application to: (906) 875-3724 or email to: timberprofessionalscooperative@gmail.com