



Kansas Independent Oil & Gas Association

MEMBERSHIP APPLICATION

Thank you for your commitment to KIOGA.

Please indicate your desired membership level and return this form, along with payment, to: KIOGA
800 SW Jackson St., Suite 1400, Topeka, KS 66612-1216 - You may also join online at www.kioga.org

Company: _____

Name: _____ Category: _____ Operator _____

Address: _____

City: _____ State: _____ Zip: _____

Office Phone: _____ Cell Phone: _____

Email: _____ Website: _____

How do you prefer to receive communication from KIOGA? _____ Email _____ Mail

_____ Enroll me as a regular member at \$310 _____ Add voluntary Public Relations Fund at \$25

_____ Enclosed is my check in the amount of _____.

_____ Enroll me as a Producer/Operator (Dues based on production numbers, invoice me).