



Associate Membership Application

Membership runs from June 2017 to July 2018

Firm
Name: _____

Business Address: _____

City: _____ State: _____

Zip: _____

Telephone: _____

Fax: _____

E-mail: _____

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Broker (if applicable)

Supplies Distributed: (please check one)

Food Equipment

Other _____

Representatives

Name _____

Home
Address _____

City _____ State _____

Zip _____

Telephone _____

Fax _____

E-mail

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Associate Membership Dues for one year are \$75.00 **OR** are included in the purchase of a booth for the School Nutrition Association of Oklahoma Annual Food Show. (Application must be submitted either way)

Please make check payable to: SNA of Oklahoma

Thank you for your support,
Elizabeth Glaser
Association Membership Chair
C/o Ponca City Public Schools
111 West Grand Avenue
Ponca City, OK 74601
(580) 761-2399
580-718-3991