



JANE PHILLIPS SOCIETY
BARTLESVILLE CHAPTER
MEMBERSHIP APPLICATION

Date: _____

Name: _____

- ____ Employee on the regular payroll of ConocoPhillips
- ____ Employee on the regular payroll of Phillips 66
- ____ Former employee
- ____ Employee of a company affiliate _____
- ____ Sponsor/former sponsor
- ____ Spouse of employee
- ____ Relative of current JPS member (at least age 18)
- ____ Supporter of JPS values

Home Mailing Address: _____

Home Phone: _____

(If applicable)

Company Mailing Address: _____

Company Phone: _____

E-mail address: _____

Are you a former JPS member? ____ Yes ____ No

If yes, which chapter and years? _____

Please make check payable to JPS for \$20.00 and mail to:
JPS Membership Director
PO Box 2425
Bartlesville OK 74005