

MEMBERSHIP BENEFITS

The purpose of the Louisiana Gas Association is to advance and safeguard the distribution, transportation, production, and use of natural gas statewide.

LGA Objectives

- To sponsor public education and public relation programs that will enhance the distribution and use of natural gas
- Create greater confidence in, respect for, understanding of and goodwill toward the natural gas industry
- To accumulate data which will be useful in developing Engineering, Operating, and Management programs and work practices which will contribute to improvement in the safe use of natural gas
- To procure, review, and provide comment on rules and regulations related to the use of natural gas as proposed by competent authority
- To furnish Association members with suggestions, guidelines, methods or other data to assist in compliance with such valid rules and regulations
- To conduct affairs of the Association in a manner to foster cooperation between industry and government bodies.

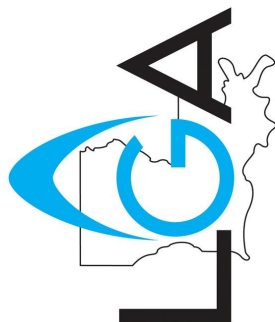
ADDITIONAL BENEFITS

- Direct Participation at Business Meetings
- Quarterly Newsletters
- Excellent Networking Opportunities with gas members statewide
- Governmental Relations Services provided by the Tatman Group.
- Technical Training
- Annual Convention
- College Scholarships
- Guidance with regulatory compliance

Contact LGA

P.O. Box 82531
Baton Rouge, LA 70884
Phone: 225-218-6885
Toll-Free: (866) 921-0923
Fax: 225-767-7648
Email: LGA@tatmangroup.com
www.louisianagasassociation.org

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LOUISIANA GAS ASSOCIATION





MEMBERSHIP APPLICATION

MEMBERSHIP DUES

Gas Transmission Members:

Members engaged in transmission of gas shall pay annual dues based on the annual throughput for the year immediately prior to the association's fiscal year.

Gas Volumes	Annual Dues
All Transmission	\$750.00/yr.

Gas Distribution Members:

Members engaged in the distribution or delivery of gas shall pay annual dues based on the number of meters in the state of Louisiana billed during the month of December immediately prior to the association's fiscal year.

Delivery of gas based on categories below.

Number of Meters	Annual Dues
3,750 or less	\$100.00
3,751 to 5,000	\$200.00
5,001 to 10,000	\$300.00
10,001 to 25,000	\$450.00
25,001 to 200,000	\$750.00
Over 200,000	\$1500.00

Master Meter Members:

Category	Annual Dues
Civil Parish School Boards	\$100.00/yr for each Board
Universities	\$100/yr for each School
Vo-Tech Schools	\$100.00/yr for each School
Individual Parochial School or Private School	\$10.00/yr for each school
Church or Church Complex	\$100.00/yr for each Church
Housing Authority	\$100.00/yr for each Location
Health Care Facilities	\$100.00/yr for each Location
Trailer Parks (up to 50 units)	\$100.00/yr
Trailer Parks (more than 50 units)	\$100.00/yr
Municipal Associations	\$150.00/yr

Dues to LGA may be tax deductible as an ordinary business expense, please consult your tax advisor for further guidance.

Membership Name (Company): _____

Named Representative: _____

Title: _____

* Your named representative will receive all information and announcements from the association and will represent your organization in business meetings. This employee will pay no additional membership dues. Additional employees may join as an individual member for \$25 each. Please copy this form and provide the "additional individual member" information below for each member from your company.

Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____

Email: _____

Please complete the appropriate information for your type of membership:

Gas Transmission Companies: Give volume of gas delivered through your system during the last calendar year: _____

Gas Distribution Systems: List numbers of active meters in your system on last December 31: _____

Master Meter Member: List Category from other page _____

Associate Members: \$200.00 Briefly describe product or service: _____

Individual Members: \$25.00 Please fill out the application below

Application for Individual Member

Name: _____ Title: _____

Membership Name (Company): _____ Mailing Address: _____

Phone Number: _____ Fax Number: _____

Email: _____

Credit Card Payments:

Name: _____ Billing Address, City, State, Zip: _____

Exp Date: _____ Card Number: _____

V-Code: _____ Signature: _____

Phone Number: _____ Amount Enclosed: _____

Please return this form with your check made payable to :

Louisiana Gas Association
P.O. Box 82531
Baton Rouge, LA 70884
Phone: (225) 218-6885
Fax: (225) 767-7648

**** Enclose a check for the first year's dues, and include additional forms if necessary.**