



2012 TRUST Membership Form

We would like to join TRUST at the _____ level.

We have enclosed a check for _____ amount.

Contact Name _____

Contact Job Title _____

Organization _____

Office Phone _____

Cell Phone _____

Email _____

Mailing Address _____

To mail your membership, please enclose your personal or corporate check payable to *TRUST* along with this completed form to **PO Box 16112, OKC, OK 73113**

For membership questions please call or email Helra Han
at (405) 802-8184 or helrahan@gmail.com