



PBUS MEMBERSHIP APPLICATION

Name: _____ Bail License* # _____

Agency: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Sponsored By: _____ Home Zip Code**: _____

****For your congressional district**

Individual Voting Membership is \$300 per year; Individual Membership is \$120 per year; Agency Membership is \$675 per year, and Insurance Company Membership is \$1500 per year. PBUS members receive a PBUS membership pin, membership card, membership certificate, subscription to PBUS newsletters and conference registration discounts. Membership is for twelve months

Sign me up as an:

_____ Individual Voting Member (\$300) _____ Individual Member (\$120)

_____ Insurance Company Member (\$1500) _____ Agency Member **(\$675)

** Includes 2 Voting Members and up to 4 non-voting members. Please list additional names on the reverse side.

Payment Method:

_____ Check _____ Visa _____ Master Card _____ American Express _____ Discover

Credit Card #: _____ Expiration: _____ Zip Code: _____

Signature: _____ Card Security No: _____

Please return the application, along with your payment, to:

Professional Bail Agents of the United States
1301 Pennsylvania Avenue, NW, Suite 925, Washington, DC 20004
You can also Fax Applications to 202-783-4125 or visit us online at
www.pbud.com for membership application & conference registration
Questions, please call 1-800-883-PBUS.

Thank you and welcome to PBUS

Contributions or gifts to the Associations are not deductible as charitable contributions for Federal income tax purposes. However, payments of membership dues are deductible for most members of a trade association under section 162 of the Internal Revenue code as ordinary and necessary business expense.

* PLEASE PROVIDE YOUR BAIL LICENSE NUMBER AND/OR THE NAME OF THE STATE AGENCY, ENTITY OR INDIVIDUAL THAT GIVES YOU THE PRIVILEGE TO POST BAIL.

For Agency Member Use Only

Please list additional members below

Second Voting Member*: _____ Bail License # _____
Non – Voting Member: _____ Bail License # _____
Non – Voting Member: _____ Bail License # _____
Non – Voting Member: _____ Bail License # _____
Non – Voting Member: _____ Bail License # _____

** The primary Agency Member (whose name appears on the front side) will also be the contact person for the Agency.*