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#### APPLICATION

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Please fill in the following information:

- 1. Will this be an application for an SEPM Individual Consultant Membership or for an SEPM Company Membership?
  - a. Individual Consultant \_\_\_\_\_
  - b. Company \_\_\_\_\_

2. Fu	Il legal name of Applicant:	
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- 3. Full Legal Name of Company (if applicable): \_\_\_\_\_
  - a. Total Number of geoscientists \_\_\_\_
  - b. Total Number of that will utilize this license \_\_\_\_\_
- 4. Please provide a physical address, telephone number and an e-mail address for the Applicant:

5. Please indicate below whether the Applicant is a current member SEPM and the membership number:

YES \_\_\_\_\_NO\_\_\_\_

If YES, Membership Number \_\_\_\_\_

6. Please list any proposed use of SEPM content outside of those listed in this application.

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(see Exhibit A)

The SEPM Member Applicant agrees to the terms and conditions of the Special License Agreement.

DATED this \_\_\_\_ day of \_\_\_\_\_, 202\_\_\_.

Ву:\_\_\_\_\_

List of other consultancy members who would be utilizing this license, if any:

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DATED this \_\_\_\_ day of \_\_\_\_\_, 202\_\_\_\_.

### SEPM (SOCIETY FOR SEDIMENTARY GEOLOGY)

By: \_\_\_\_\_

Its:

SEPM (Society for Sedimentary Geology) 500 S. Lynn Riggs Blvd #329 Claremore, OK 74017

	Number of Employees Utilizing License	Special License Fee
Consultancy with	1	\$1,000
Consultancy with	2	\$1,500
Consultancy with	3	\$2,250
Consultancy with	4	\$3,000
Consultancy with	5	\$3,500
Consultancy with	>5	Contact SEPM

# Exhibit A. Special License Fee Schedule