The Atlanta Black Tie Club Application for membership (please print)				
Name:			DA	ATE:
Home Address: _				SMALL PHOTO REQUIRED
CITY	STATE	ZIP		
HOME PHONE #: (Cell Phone Number	Preferred)			
Office Phone #:_				
E-Mail:				
Birthday Month:Day:				
NAME OF EMPLOYER OR BUSINESS:				
CURRENT TITLE OR POSITION:				
ANNUAL DUES ARE	\$175.00. PLEASE	E SEND YOUR	COMPLETE	TIE CLUB IS \$100.00 AND D APPLICATION ALONG WITH THE AMOUNT OF \$275.00 TO:
Ms. Susan Nutta	LL 4209 CAI	NYON POINT	CIRCLE	Roswell, GA 30076
SPONSOR'S NAME (PLEASE PRINT) SPONSOR'S SIGNATURE				
APPLICANT'S SIGNATURE PHOTO MUST ACCOMPANY APPLICATION!				