



PRIVATE PROVIDERS ASSOCIATION OF TEXAS  
2024 Service Associate Membership Application

**Service Associate Membership** – Non-voting membership granted to an individual or business entity not qualifying for Regular Membership but dedicated to the delivery of services and/or products to people with developmental disabilities and/or the providers of direct services. You can complete this form with Adobe Reader or print and complete.

Dues are \$1,000.00

**Membership Information:**

Contact Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

Telephone: \_\_\_\_\_ FAX: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

**Payment Information:**

\$ \_\_\_\_\_ TOTAL PAYMENT ENCLOSED

Check (Please make payment payable to PPAT)

Credit Card: American Express Discover MasterCard VISA

Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Credit Card Holder Name: \_\_\_\_\_ CVV: \_\_\_\_\_

Credit Card Holder Signature: \_\_\_\_\_

Note: Personal or digital signature required to process applications using a credit card. (In Adobe Acrobat tools menu click on "Fill & Sign". Complete requested information. You will be prompted to add your digital ID/signature. You can create a secure digital ID/signature by following the on-screen instructions. After completion, save to your computer and email to PPAT. For non-digital signatures - after completion, print, sign & fax to PPAT.)

As a member benefit, PPAT provides links to members' websites on its webpage. Please send us your company logo in jpeg or png file.

Upon receipt of payment and all requested information, a link to your website will be posted on PPAT's website within 7 days.

Forward your completed application with payment by **January 29, 2024** to:

PPAT • 8711 Burnet Rd., Suite E-53 • Austin, TX 78757

512.452.8188 • 512.458.3078 fax • ppat100@aol.com • www.ppat200.com