

# Kentucky Occupational License Association

## 2024 Membership Application and Renewal

**MEMBERSHIP RUNS FROM JANUARY 1ST THROUGH DECEMBER 31ST**

Name of Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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

### For each Member, Please Provide the Following (Please Type or Print Legibly)

Name \_\_\_\_\_  
Title \_\_\_\_\_  
Email \_\_\_\_\_

Name \_\_\_\_\_  
Title \_\_\_\_\_  
Email \_\_\_\_\_

Name \_\_\_\_\_  
Title \_\_\_\_\_  
Email \_\_\_\_\_

Name \_\_\_\_\_  
Title \_\_\_\_\_  
Email \_\_\_\_\_

Name \_\_\_\_\_  
Title \_\_\_\_\_  
Email \_\_\_\_\_

Name \_\_\_\_\_  
Title \_\_\_\_\_  
Email \_\_\_\_\_

(For additional members, Use Additional Sheet)

**Membership Fees: Was Organization Above a Member in 2023?** \_\_\_\_\_ **Yes** \_\_\_\_\_ **No**

_____	<b>Group Rate</b>	<b>\$200.00</b>	_____
	* Initial Application	10.00	

_____	<b>Single Member</b>	<b>50.00</b>	_____
	* Initial Application	10.00	

**Total Due:** \_\_\_\_\_

**Make Check Payable and Remit To:**

**KOLA  
P.O. Box 146  
Falmouth, KY 41040**