

Houston Private Equity Association

Membership Application

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Web site address: _____

Applicants Name: _____

Email Address: _____

Other Co. Representatives & Email Addresses:

Funds under management (include maximum leverage for SBICs)

Business Stage / Investment Strategy: _____

Financing Range Considered: _____

Industry Preferences: _____

Investing Experience: _____

(the first member from each organization must provide capital history, including a list of investments with a brief explanation of transactions and other information.)

Professional societies/organizations: _____

Professional references:

Name:

Company:

Phone:

Sponsor: _____ Years Known: _____
(Application will not be processed without an HPEA member sponsor.)

Signature: _____

Position: _____

SEND COMPLETED FORM by email or mail TO:

Houston Private Equity Association
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Houston, TX 77042
dale@amchouston.com
(713) 839-0808