



# Constellation®

An Exelon Company

## [SAMPLE LETTER OF INCLUSION]

**Date:** \_\_\_\_\_

**Member Name:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City/Town:** \_\_\_\_\_

### **Re: Authorization to Participate in Association Energy Program**

To Association Energy Program Manager and Constellation:

I am submitting this letter to request access to the Association Energy Program benefits. As the authorized representative of \_\_\_\_\_, ("Member"), a member of \_\_\_\_\_ ("Association"), I authorize the Association and its currently endorsed energy supplier, Constellation NewEnergy, Inc. and Constellation NewEnergy-Gas Division, LLC ("Constellation"), to provide exclusive Association Energy Program electricity and/or natural gas pricing directly to me.

I note that this Authorization to Participate does not obligate the Member to purchase electricity or natural gas from Constellation under the Association Energy Program. I may obtain pricing and purchase electricity or natural gas from any other supplier or through a third party broker or consultant. However, pricing information and offers to purchase electricity or natural gas under the Association Energy Program will be provided to the Member exclusively through the Association and Constellation and may differ from pricing provided through third parties.

This Authorization to Participate is effective as of the date noted below and may be terminated by the Member at any time by providing the Association or Constellation a ten (10) business day written notice.

AGREED TO AND ACCEPTED ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_.

**Member** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Signature:** \_\_\_\_\_