



WISCONSIN MUNICIPAL CLERKS ASSOCIATION
2010 ASSOCIATE MEMBERSHIP APPLICATION
GROWTH THROUGH CARING; KNOWLEDGE THROUGH SHARING

MEMBER TYPE: (Please check one)

FEE:

Associate Member (persons interested in the WMCA-educational,
financial, municipality related organizations and vendors, etc.)

\$100.00

Additional Associate Member (same firm as Associate Member)

\$50.00

[Please Print:]

CONTACT NAME: _____

TITLE: _____

E-MAIL ADDRESS: _____

BUSINESS NAME: _____

ADDRESS

Street: _____

P.O. Box: _____

City, State: _____

Zip Code: _____

TELEPHONE: _____

FAX: _____

**SERVICE OR
PRODUCT:** _____

WI SALESPERSON: _____

E-MAIL ADDRESS: _____

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I hereby apply for membership in the Wisconsin Municipal Clerks Association and attached is my membership fee. I understand that membership runs from January 1 through December 31.

Signature

Date

Send Application To: WISCONSIN MUNICIPAL CLERK'S ASSOCIATION
FAITH ELFORD, WMCA COORDINATOR
1414 MONTCLAIR PLACE
FORT ATKINSON, WI 53538

If you have any questions you can reach me at:

Phone & Fax: (920) 568-9278
E-mail address: coordinator@wisclerks.org

Revised:
Dec 2009