

VIRGINIA MUNICIPAL CLERKS ASSOCIATION



Membership/Renewal Application Form July 1, 2010 – June 30, 2011

Name: _____

Title: _____

Jurisdiction: _____

Address: _____
(Street/P.O. Box) (City/State) (Zip Code)

Telephone No.: () _____ Fax No.: () _____

E-Mail address, if applicable: _____

Population: _____ Amount paid: \$ _____

(IMPORTANT: PLEASE RETURN TOP PORTION OF FORM WITH PAYMENT)

Full and Associate * Membership Dues:

Population less than 5,000	\$15	
5,000 to 10,000	20	
10,001 to 50,000	30	
50,001 and over	40	
Deputy Membership	15	(if a membership has been paid by the Clerk of Council, Clerk or Recorder of the Jurisdiction)
Corporate Members:	50	
Retired Members:	10	

*Please note that Associate Membership is open to local government professionals other than the appointed Clerk of Council, Clerk or Recorder of the municipality. Associate members shall have the right to attend meetings and participate in discussion; however, they are not eligible to make motions, vote, hold office, or enter the IIMC certification program.

Please note the **mailing address below** and make your check payable to: **Virginia Municipal Clerks Association.**

Mail Application and Payment to:

Pamela L. Foshee
Deputy City Clerk
City of Newport News
2400 Washington Avenue
Newport News, VA 23607
If you have questions call: (757) 926-3689 or email: pfoshee@mngov.com