

ASSOCIATE MEMBERSHIP CONTRACT

Yes, I want to take advantage of the many opportunities offered to Associate Members of the Pennsylvania Municipal League including:

- Listing with a link to your company on our website at <u>www.pml.org</u>
- Access to League membership directory
- Subscriptions to the digital *Municipal Reporter* magazine and *Legislative Locator* newsletter
- 10% discount on Municipal Leadership Summit walk-around vendor option
- 20% discount on advertising in the Municipal Reporter magazine
- Limited access to League's Research & Inquiry service

Name: _		
Title:		
Busines	is:	
Address	3:	
City:	State: Zip:	
Phone:		
Fax:		
Email: _	Website:	
	League Associate Membership for \$1000/year .	
	In addition to becoming an Associate Member of The League, I would like to take advantage of th discounted rate of \$100/year for a Associate Membership in the Pennsylvania State Association Township Commissioners, for a total of \$1100/year .	
	My colleague is already an Associate Member; please register me as a Cooperating Member for fe benefits at \$150/year .	ull
	Enclosed is my check for membership payment. Make checks payable to the Pennsylvania Municipal League.	
	I am paying by credit card. Contact Susan Helms in our office at <u>shelms@pml.org</u> . Susan will send a PayPal invoice to process your electronic payment securely.	
This con	tract is effective for one year from the date payment is received.	
Return te	b: Pennsylvania Municipal League Attn: Debbie Bitting or <u>dbitting@pml.org</u> 414 North Second Street Harrisburg, PA 17101	

Signature