

MID-ATLANTIC MOSQUITO CONTROL ASSOCIATION

New Membership & Member Renewal Application

	MEMBERSHIP TYPE:	() RENEWAL	() NEW
Name:			
Organizatio	on:		
Mailing Ad	ddress:		
City:	S	state:Zip Code:	
Telephone:	:	Fax:	
Email:			
	Address and Phone:		
Annual YR	Membership Dues (FILL IN) (*Membership Dues rate effective		
	Sustaining Membership Dues rate effects. Sustaining Membership Dues rate effects.		
		Total Enclosed \$	
• Dues per	riod runs from annual meeting to annual mee	ting.	
• Regular	Membership entitles member to one vote and	l the right to hold an office in the	Association.
area and individua	ing Membership qualifies the member for one d (1) individual registration at the Annual Edual nal name listed above will be considered the in ation. No individual membership dues need by	ucational Conference, and a listin dividual contact for the Sustainin	ng in all publications. The

 $Questions \ or \ comments \ can \ be \ directed \ to \ Andy \ Kyle, \ Secretary-Treasurer, \ phone: \ (717) \ 793-7705 \ or \ aklk1@comcast.net$

Send payment (made payable to MAMCA) and mail with this form to:

Andy Kyle MAMCA Secretary-Treasurer 2471 Mayfield St. York, PA 17406