



2020 MEMBERSHIP APPLICATION

Name: _____ Title: _____ CMC / MMC

Municipality: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____ Work Phone: _____

Are you currently working toward certification? _____ If yes, which? CMC MMC

Please check any of the following interest/concerns/educational needs you have:

_____ Agenda/Packet Preparation	_____ Paperless Packets	_____ Records Storage
_____ Budget Preparation	_____ Parliamentary Procedures	_____ Resolution
_____ Employee Management	_____ Proclamation Writing	_____ Social Media
_____ Federal/State Legislation	_____ Public Notices	_____ Transcription
_____ Ordinance Writing	_____ Records Management	
_____ Other: _____		

Are you interested in helping with any of the following?

_____ Annual Audit	_____ Facebook Updates	_____ Photos at Meetings
_____ Clerk of the Year Selection	_____ Scholarship Selection	_____ Website Updates
_____ Education/Training Topics	_____ Serving as an Officer	

Membership Type: _____ Active Member \$35.00 _____ Associate Member \$35.00 _____ Honorary Member \$0.00

****PLEASE SEE THE ENCLOSED BROCHURE TO VERIFY WHICH MEMBERSHIP TYPE. THESE DESIGNATIONS WERE UPDATED DURING 2019.****

PLEASE REMIT ALL PAYMENTS TO:

**DMCA TREASURER
C/O TOWN OF ELSMERE
11 POPLAR AVENUE
WILMINGTON, DE 19805**