

MEMBERSHIP REGISTRATION AND INVOICE FISCAL YEAR 2021

Please check one of the following:

New Member:		
Previous Meml	per:	
Please check th	ne category of membership desired:	
	Regular Membership (no additional charge for lunches) *Pro-rated for remaining meetings	\$ 225.00
	Associate Membership (lunches are \$25.00 per meeting attended)	\$ 100.00
	Retired Membership (lunches are \$25.00 per meeting attended)	No charge
	Total Due:	
Member Name	:Title:	
City/Town/Age	ncy:	
Address:		
City:	ZIP:	
Telephone Nur	nber:	

City of Medford ATTN: Shab Khan, CPO 85 George P Hasset Drive

Medford, MA 02155

^{*}Please note that the remit address for MAPPO has changed. Contact your Finance Office to have this new address updated in order to ensure that this form and your payment are sent to the correct destination.

^{**}Please also note that an individual's membership belongs to the position and entity listed on this form. If a member takes a new position elsewhere, that member must ensure that the new entity has a membership available or they must join the organization under the new position at the new entity.