



MEMBERSHIP REGISTRATION AND INVOICE FISCAL YEAR 2024

Please check one of the following:

New Member: _____

Previous Member: _____

Please check the category of membership desired:

	Regular Membership (no additional charge for lunches)	\$ 225.00
	Associate Membership (additional charge for lunch will be provided with registration information each month)	\$ 125.00
	Retired Membership (additional charge for lunch will be provided with registration information each month)	No charge
Total Due:		

Member Name: _____ Title: _____

City/Town/Agency: _____

Address: _____

City: _____ ZIP: _____

Telephone Number: _____

Email: _____

Please make checks payable to "MAPPO" and mail payment, along with a completed copy of this form/invoice to:

***FITCHBURG CITY HALL
ATTN: SAMANTHA SAUER
718 MAIN ST SUITE 208
FITCHBURG, MA 01420**

***Please note the NEW remit address for MAPPO. Contact your Finance Office to ensure you have the correct address so that this form and your payment are sent to the proper 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.**