MEMBERSHIP APPLICATION – 2020

I wish to apply for the following Membership:

_____ Full Active Member $50.00 (all employees of government entities)

_____ Associate Member $60.00 (all employees of non-government entities)

Name ___ _____ _____
First Last

Title _____

Locality or Business Name _____

Business Address _____

_____

Telephone: ( ) _____

E-mail Address: _____

I am interested in serving on the following committee:

_____ Education _____ Fall Conference

_____ Associate Members Relations _____ Spring Conference

_____ Communications & Standards _____ Awards & Membership

For more information on any committee please visit our website (www.vgfoa.org).

Make check payable to: VGFOA

Mail to: Virginia Government Finance Officers' Association
8 E. Canal Street
Richmond, VA 23219