

**Contra Costa Special Districts Association**

**Mail completed form with payment to treasurer:**

**Bert Michalczyk**

**32 Leeds Ct E**

**Danville CA 94526**

**ASSOCIATE MEMBER APPLICATION FORM**

***Membership Requirements:*** Any person or organization that provides services to special districts or has evidenced interest in the purpose of the Chapter may become an associate member upon approval of Chapter membership and payment of dues. Associate members have no voting privileges.

Simply complete the form below and return to CCSDA with your dues investment.

There are two dues Categories for Associate Membership:

Regular Associate Members - $200 Annually

Sponsoring Associate Member - $500 Annually

By becoming an Associate Member you will become part of a growing number of community leaders that believe that Special Districts care about our community.

Please complete the following information:

Company Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associates Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company Web Site: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return this form with your dues investment and a company brochure or informational flyer to CCSDA Treasurer Bert Michalczyk

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***https://contracostasda.specialdistrict.org***