



Your professional link to excellence

Renewal – Active or Government Associate Member Application

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Name \_\_\_\_\_ Title\*\* \_\_\_\_\_

Circle One: City Town Village \_\_\_\_\_ Municipality Name \_\_\_\_\_

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Street Address \_\_\_\_\_ P.O. Box or Apt. # \_\_\_\_\_

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City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ County \_\_\_\_\_

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E-mail Address \_\_\_\_\_ Work Telephone \_\_\_\_\_ Fax Phone Number \_\_\_\_\_

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Population \_\_\_\_\_ Website Address \_\_\_\_\_

**Please respond to the next four questions. They help us with annual surveys we create to help our members:**

**Type of Internet Connection:** Dial Up | Cable | DSL      **Type of Position:** Part Time or Full Time

**Are you:** Elected or Appointed      **Please tell us your Annual Salary:** (Actual or Est.) \_\_\_\_\_

**\*\*We now have two categories of membership. Please check the one that fits you:**

**Active Member:** Either Clerk, Deputy or any individual actively performing duties of the Municipal Clerk as defined by state statutes.

**Government Associate Member:** Membership available to government employees that do not fit the Active Member category but are interested in the WMCA.

If you are replacing someone who was a member, please write their name: \_\_\_\_\_

I hereby apply for membership in the Wisconsin Municipal Clerks Association and enclosed is my \$65.00 renewal fee. I understand that membership runs from January 1 through December 31.

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

Send check and application to: Wisconsin Municipal Clerks Association  
1414 Montclair Place  
Fort Atkinson, WI 53538

If you have any questions: Phone: (920) 568-9278 or E-mail: [coordinator@wisclerks.org](mailto:coordinator@wisclerks.org)

**If paying by credit card, fill out the following:**

Visa      Card Number \_\_\_\_\_

Mastercard      Security Code \_\_\_\_\_ Expires (MM/YYYY) \_\_\_\_ / \_\_\_\_

Discover      Print Cardholder's Name: \_\_\_\_\_

American Express \_\_\_\_\_

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