

CSRA Professional Pest Control Association

www.csrpca.org



2016-2017 Membership Application/Renewal Request

Dear Member or Prospective Member & Allied Members:

This is the time of year when our association collects its dues and renews its membership list.

Number of Employees	Membership Due Amount
5 or Less	\$75.00
6 to 10	\$85.00
11 to 20	\$95.00
21 or More	\$135.00
Allied Member	\$100.00

Please make all checks, in any form payable to: **CSRA Professional Pest Control Association**, you may pay at the monthly meetings, or mail to: **P.O. Box 253 Augusta, GA 30903 Attn: Secretary/Treasurer**. Join or renew your membership with the CSRA PPCA today. Our Board Members & Officers are here to serve you.

Please complete the information below and return it with your paid dues. You may also pay by credit card by emailing us at csra@gmail.com with your request and the best time in which to contact you. A \$4 processing fee is added to process any credit card payment. Joining for the first time? Please email your company logo in a .jpeg format to: csrapca@gmail.com so we can include your company in our on-line directory.

Sincerely,

Karen Fultz

Karen Fultz
Secretary/Treasurer

COMPANY NAME: _____

COMPANY ADDRESS: _____

COMPANY PHONE # _____

CONTACT PERSON: _____

EMAIL ADDRESS: _____

WEB SITE: _____

1ST TIME MEMBER ___ **YES** ___ **NO**

___ **ALLIED MEMBER**

Office Use

DUES AMOUNT PAID

CHECK #

RECEIVED BY
