## 2025 Application for New Members

Membership Type: (Select One)	☐ Individual	☐ Municipal	ity 🛭 Firm	n □ Retired*	
*A retiree is defined as a member who has been officially income are from a pension(s				mary or majority source of	
Full Name (Contact Information for Municipality or Firm	n Membership):				
Employer/Municipality:		Title:			
Billing Address:					
City:		State:		Zip:	
Phone (Office):					
Home Address:					
City:		State:		Zip:	
Phone (Home): ( )		E-Mail:			
I would like to subscribe t	o the MCDA email	Networking List:	☐ Yes ☐ N	0	
I want my MCDA-related correspondence to b	e mailed to my:	☐ Home address	☐ Employer//	Municipality Address	
I want all my MCDA-related invoices to be n	nailed to my:	☐ Home address	☐ Employer/ <i>N</i>	Municipality Address	
I am interested in ser	ving on one of	the following	g committee	es:	
☐ Advocacy	☐ Professional Development				
Communications	□ Me	☐ Membership & Organizational Development			
☐ Finance	□ Officer/Executive Committee				
Please return this Maine Cor	form with appro nmunity Develop 60 Community Augusta, ME 0	ment Association Drive			
Please make a copy of this form	for your rec	ords and ser	nd original	with payment.	
S	Standard Membe	rship Ar	mount Due:	\$100.00	
	Retired Membe	•	nount Due: _	_	
Membership dues year runs January 1, 20		•	_		
Questions: Call 1-800-452-8786 or (207) 6	23-8428	D	ate Mailed: _		
			Check #: _		

Please note that the membership is based on the membership type. For individual memberships, membership follows the individual. For municipality or firm memberships, membership stays with the entity. Should contact information change, please contact our office to update the information.