

# BARNSTABLE COUNTY PUBLIC WORKS ASSOCIATION, INC.



## MEMBERSHIP DUES - 2024

Municipal/Associate Member	\$30.00
Corporate Member - First Person	\$100.00
Corporate Member - Additional Person	\$30.00
Honorary Members	N/C

A Membership is issued to a single person and is not transferrable, unless approved by the Board of Directors. **The \$100.00 Corporate Member fee applies to all businesses** and includes one person from that business; each additional member shall pay a dues fee of \$30.00. Voted Honorary Members are not required to pay annual dues, but must pay for their meals. In the event that an Honorary Member is currently employed by or representing a vendor, the appropriate Corporate Member would apply.

**An application must be submitted for each member, including Honorary Members.** If dues are not received by **March 31st**, that member will be removed from the membership mailing list.

Please complete this form and remit with your dues payment to:

**B.C.P.W.A.  
P.O. Box 1495  
Harwich, MA 02645**

*It would be greatly appreciated if municipal members would email this form to [BCPWAssoc@gmail.com](mailto:BCPWAssoc@gmail.com), as municipalities often don't include the form with their check*

## MEMBERSHIP INFORMATION

*(One member per form, please!)*

**Please pay from this invoice**

Name: \_\_\_\_\_  
Date: \_\_\_\_\_ New Member as of 2024? (Yes/No) \_\_\_\_\_  
Employer's Name (Business/Town) \_\_\_\_\_  
Title: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Member Phone #: \_\_\_\_\_ Fax: \_\_\_\_\_ Cell: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**PLEASE INCLUDE EMAIL ADDRESS OF OFFICE ASSISTANT OR OTHER PERSON YOU WISH TO RECEIVE MEETING NOTIFICATIONS ON YOUR BEHALF**

Name: \_\_\_\_\_ Email: \_\_\_\_\_