



**WISCONSIN COUNTY CODE ADMINISTRATORS
2012 RENEWAL/APPLICATION FOR MEMBERSHIP**

Name: _____

Current Employer: _____ Work Phone: () _____

Business Address: _____

Title/Position: _____ e-mail: _____

Area of Expertise: _____ Years of Experience: _____

Would you be willing to serve on the WCCA Executive Board? Yes No

Would you be willing to serve on a WCCA committee? If "Yes", which committee or committees?

Membership fees include the dues for the current operating year, membership message board and reduced registration fees for the spring and fall educational seminars.

With my signature below I acknowledge that I have read the statement of principles of the WCCA (see reverse side) and agree to abide by those principles.

Signature of Applicant

Date

Membership Category: Full ___ \$40.00 Associate ___ \$40.00

*This is an additional renewal from this office ___ \$30.00

NOTE: Renewal applications for the first member from any office is \$40.00, and \$30.00 for each additional member from the same office. Please submit applications from the same office in the same envelope.

**Please submit this completed form along with your payment to the office below.
Make checks payable to the Wisconsin County Code Administrators.**

WCCA
JEFFERSON COUNTY PLANNING & ZONING
320 S MAIN ST. ROOM 201
JEFFERSON, WI 53549