

# COLORADO STATE MANAGERS ASSOCIATION

## Membership Application

For Fiscal Membership Year July 1, 2009 – June 30, 2010

Mark all that apply:  new member  renewing member  
 retired state employee  post secondary student

NAME: \_\_\_\_\_

TITLE (skip if retired): \_\_\_\_\_

AGENCY (skip if retired): \_\_\_\_\_

DIVISION (skip if retired): \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP CODE: \_\_\_\_\_

TELEPHONE: (\_\_\_\_) \_\_\_\_\_ FAX: (\_\_\_\_) \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

**MEMBERSHIP DUES: \$25 PER FISCAL YEAR** **CSMA VENDOR #742-467-782D**  
**\$10 PER FISCAL YEAR FOR RETIRED STATE EMPLOYEES**  
**\$10 PER FISCAL YEAR FOR Post-Secondary Students**

Payment Method:  Enclosed is my check for (circle one) \$25.00 / \$10.00

Credit Card Info for payment of the \$25.00 / \$10.00 via: MC Visa

Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CVV Code: \_\_\_\_\_

Signature of Credit Card Holder: \_\_\_\_\_

Name Imprinted on Credit Card: \_\_\_\_\_

**Mail your check or fax the credit card information along with this membership application to:**

Colorado State Managers Association

P.O. Box 19276

Denver, CO 80219-0276

Phone (303) 922-3736

Fax (303) 922-5295

E-Mail: [adminoffice@csma.info](mailto:adminoffice@csma.info)

*Dedicated to Improving Colorado State Government*

