

**Year 2010**  
**Associate Membership Application**

**Associate Membership** is open to members of administrative staff, board member or counsel of **any member agency**. Associate Members receive discounts on all conferences, legislative updates, individual copies of all conference mailings, the PAHRA Monitor, and the PAHRA Directory. Membership fee: \$125/year.

**ANNUAL DUES: \$125**

Please make a check payable in the amount of \$125 to **PAHRA** and mail it along with this form to:

**PAHRA**  
**P.O. BOX 86306**  
**Pittsburgh, PA 15221**

**I am an employee, member of the board or solicitor of a PAHRA member: (State name of agency / company:**

Executive Director: \_\_\_\_\_

**Affiliation with above named PAHRA Member (circle one)**

**Employee      Counsel      Board Member**

Please provide the information requested below. This information will be used in the Year 2010-2011 Membership Directory.

**Your Name:**      **Title:**

**Phone Number:**

**Fax Number:**

**Street Address:**

**City:**      **State:**      **Zip Code:**

**E-Mail Address:**

**Web Page Address:**

*All membership applications are subject to the review and/or approval by the PAHRA Board of Directors*