



Connecticut Parks Association, Inc.

2019 MEMBERSHIP APPLICATION/INFORMATION

NAME:

TITLE: _____

DEPARTMENT/COMPANY:

BUSINESS ADDRESS:

Street

City

State

Zip

TELEPHONE: _____

E-MAIL ADDRESS: _____

APPLYING FOR:	PROFESSIONAL MEMBERSHIP	(\$25.00)
	COMMERCIAL MEMBERSHIP	(\$35.00)
	AGENCY MEMBERSHIP	(\$75.00)
	STUDENT MEMBERSHIP	(\$5.00)
	RETIREE MEMBERSHIP	(Free)

SIGNATURE: _____ **DATE:** _____

SEND (PAYABLE) TO:

**CONNECTICUT PARKS ASSOCIATION, INC.
C/O Gerard G. Toner, CPA Treasurer
26 Ridge Road
Simsbury, CT 06070**