2024 DUES INVOICE





Name:		Club Position:
Please comp	lete the information below or ch	eck here if there are NO CHANGES
Busi	ness Information	Home Address
Club Name		Street:
Street:		_ City:
City:		State/Zip:
State/Zip: _		Mobile Telephone:
Work phone	:	Secondary email:
Email:		_ Please send mail to: Home _ Club _
CMAA Mbrshp#:		Spouse's First Name:
	ССМ	Yes CCE Yes MCM Yes
	Please indicate your	CCMA Membership Status:
*PRO	PROFESSIONAL MEMBER	ANNUAL DUES- \$648.00
*PRO	2 nd MEMBER FROM <i>SAME</i> CL	·
*PRO	3 rd MEMBER FROM <i>SAME</i> CL	UB ANNUAL DUES- \$434.00
*FOA	FRIEND OF THE ASSOC.	ANNUAL DUES- \$510.00
*ASSOC	ASSOCIATE MEMBER	ANNUAL DUES- \$510.00
*ALUM	ALUMNUS	ANNUAL DUES- \$306.00
STU	STUDENT	NO DUES
RET	RETIRED MEMBER	NO DUES
HON	HONORARY MEMBER	NO DUES
FAC	FACULTY MEMBER	NO DUES
CONT	CONTINUATION STATUS	NO DUES

(Associate membership is possible only if you are an Associate Member of National.)

*From your dues, \$25.00 goes directly to the Joseph P. Tonetti Scholarship Fund.

Please make check payable to the

CONNECTICUT CLUB MANAGEMENT ASSOCIATION

Please return your check and this form to:

CMAACT

29 Valley Drive, #4383
Greenwich, CT 06831
Complete form online and pay by credit card
PAY BY CREDIT

