



2018 PASMA Membership Application North Chapter

☐ New Membership

☐ Renewal ☐ Check here if you changed your agency, address or phone.

Name: _____

Title: _____

Agency/Organization: _____

Department/Division/District: _____

Mailing Address: _____

Telephone: _____ Fax: _____

Email: _____

How did you learn about PASMA? _____

- ☐ Regular Membership \$75 Employees of public agencies
Past members/Retired professionals who represented a public agency and who continue in Safety/Risk Management
- ☐ Group Discount \$300 Includes five (5) Regular Memberships from the same public agency
Additional members from the same public agency are \$50 each. You are required to complete one (1) membership application per individual and check the "group discount" box on all applications.
- ☐ Affiliate Membership \$300 Vendors and non-public agencies

Networking Designation

- Contact information may be shared with regular members.
Yes ☐ No ☐
- Contact information may be shared with affiliate members.
Yes ☐ No ☐

Make checks payable to PASMA
Mail this application(s), along with your check to:
PASMA – North Chapter
Attention: Norman Wright
1630 N. Main Street #445 Walnut Creek, CA 94596

Tax ID # 68-0309592

Credit card payments are only accepted in person. Visit the website for the meeting schedule and information: www.pasmaonline.org

NOTE: All Memberships are effective January 1 to December 31.

PASMA OFFICE USE ONLY

Amount Paid: _____ Date Paid: _____ Payment Type: ☐ Cash
Received By: _____ Date Logged: _____ ☐ Credit Card ☐ Check No.: _____