



Arkansas Water and Wastewater Managers Association 2017 Membership Application/Renewal for Associate Members

(Note: Submit one application per member, or attach a master list in MS Excel with information below @\$60 per person. Name, title, utility/company and training are required on attachment.)

Name _____ Title _____

Utility/Company _____ Training ID # _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

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Water license grade _____ Wastewater license class _____

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Membership Classification	Annual Dues	Amount
Associate Only	\$60.00	\$ _____

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RETURN FORM & CHECK TO:

AWWMA
Attn: Heath Ward, Sec./Treas.
c/o Springdale Water Utilities
P.O. Box 769
Springdale, AR 72765

TOTAL AMOUNT ENCLOSED \$ _____

hward@springdalewater.com

First-time member Renewing member