

TREASURE COAST REGIONAL LEAGUE OF CITIES

Application for Associate Membership

I hereby request Associate Membership to the Treasure Coast Regional League of Cities.

CITIES	I understand that my request is subject to approval by the League, and that the League shall establish the annual dues, and that a person appointed or designated by the Associate Member shall represent each Associate Member. I further understand and agree that the Associate Member shall have no vote, nor be
FELLSMERE	eligible to hold office within the League. However, it is understood that an Associate Member may participate in all League meetings and serve on its committees. Meeting notices, minutes and
SEBASTIAN	communications pertaining to the League business and activities will be sent (via email, fax or mail) to the Associate Member's contact person. A copy of the Annual Membership Directory, Charter and By-Laws
Orchid	shall be furnished upon request.
ÍNDIAN R IVER S HORES	Our principal business is in the field of
VERO B EACH	The number of employees in the company/organization is
FORT PIERCE	Enclosed is a check in the amount of \$ for Associate Membership, subject to League Approval.
ST. LUCIE VILLAGE	Name of Company/Organization
PORT ST. LUCIE	Address
Океесновее	City, State, Zip
STUART	Designated Contact Person
SEWALL'S POINT	Telephone Fax
OCEAN BREEZE	Email Website
JUPITER ISLAND	Sponsored by (must be a municipal member)
	Please mail check and application to: Treasure Coast Regional League of Cities Attn: Patricia Christensen, Executive Director 1391 NW St. Lucie West Blvd., #190 Port St. Lucie, FL 34986
	Higher Education\$ 0
	Nonprofit Organizations & Individuals
	Companies with two to nine employees
	Companies from ten to 150 employees
	Companies from 151 to 300 employees\$ 400.