

COUNTY LOSS CONTROL COORDINATORS ASSOCIATION

CLCCA 2019 DUES & MEMBERSHIP

BUSINESS ASSOCIATE MEMBER

NAME \_\_\_\_\_  
COUNTY \_\_\_\_\_  
TITLE \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ ZIP CODE 9-Digit \_\_\_\_\_  
PHONE \_\_\_\_\_ CELL \_\_\_\_\_  
FAX \_\_\_\_\_ E-MAIL \_\_\_\_\_

**Business Associate Membership:** This membership is designated for representatives of any business, association, or any other organization with an interest in promoting and assisting Ohio counties regarding health, safety and liability issues. This membership does not include CCAO Affiliate Membership.

Business Associate Membership(s) \_\_\_\_\_ @ \$150.00

**TOTAL AMOUNT**

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Payment must be received by April 1, 2019

MAKE CHECK PAYABLE TO:

COUNTY LOSS CONTROL COORDINATORS ASSOCIATION

MAIL CHECK TO

Cathy Jones, Secretary/Treasurer  
c/o Mahoning County  
21 W. Boardman St.  
Youngstown, OH 44503