



COUNTY LOSS CONTROL COORDINATORS ASSOCIATION

CLCCA 2021 DUES & MEMBERSHIP

SPONSORING MEMBER (non-voting, organizational)

ORGANIZATION _____
 CONTACT NAME _____
 TITLE _____
 ADDRESS _____
 CITY _____ ZIP CODE 9-Digit _____
 PHONE _____ CELL _____
 FAX _____ E-MAIL _____
 PRODUCTS / SERVICES PROVIDED _____

Sponsoring Membership: This membership is designated for individuals, firms, and corporations that provide safety and risk management services and provides an opportunity to network with county safety and risk management staff and to promote best practices in their field.

Sponsoring Membership (NEW) _____ \$300.00

Sponsoring Membership for member paid in 2020 _____ \$0.00

Note: First attendee for lunch meetings free/ \$25.00 per additional attendee

BUSINESS ASSOCIATE MEMBER (non-voting, per member)

NAME _____
 TITLE _____
 ORGANIZATION _____
 COUNTY SERVICING _____
 ADDRESS _____
 CITY _____ ZIP CODE 9-Digit _____
 PHONE _____ CELL _____
 FAX _____ E-MAIL _____

Business Associate Membership: This membership is designated for representatives of any business, association currently servicing an Ohio county, or any other organization with a direct interest in promoting and assisting Ohio counties regarding health, safety and liability issues.

Business Associate Membership(s) (NEW) _____ @\$150.00 per individual

Business Associate Membership(s) for members paid in 2020 _____ @ \$0.00 per individual

***INDIVIDUALS AND ORGANIZATIONS CAN HOLD BOTH SPONSORING AND BUSINESS-ASSOCIATE MEMBERSHIPS**

TOTAL AMOUNT _____

Payment must be received by April 1, 2021

MAKE CHECK PAYABLE TO: COUNTY LOSS CONTROL COORDINATORS ASSOCIATION

Federal ID# 47-3042590

MAIL CHECK TO:

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