



2024-2025 MEMBERSHIP APPLICATION / RENEWAL

Please enroll me as a member of the Arizona Municipal Clerks' Association.
My remittance for the proper dues is enclosed. Membership year is July 1, 2024 through June 30, 2025.

New Member Renewal (due by July 12, 2024)

Full Name _____ Title _____

Department _____ City Town County Special District Population _____

Name of City / Town / County or Special District _____

Please designate your Region ([click here](#) to view Region Map)

R-1 R-2 R-3 R-4 R-5 R-6 R-7 R-8 R-9

Mailing Address _____

Email Address _____

Please designate whether you have earned your CMC or MMC status: CMC Year _____ MMC Year _____

Please designate whether you have completed the State Election Officer Certification Program: Yes No

If yes, in what year? _____

Membership Category/ Fees (choose one)

For detailed membership definitions, please see the reverse.

FULL MEMBER (Max 2 per city/town): Municipal, District or County Clerk, Deputy or Assistant Clerk (voting member)

- FULL MEMBER (Population OVER 20,000) \$175
- FULL MEMBER (Population UNDER 20,000) \$100

ASSOCIATE MEMBER: Other governmental employee (non-voting member) \$75

RETIRED MEMBER \$15

STUDENT MEMBER..... \$25

Voluntary Contribution to the AMCA Education Fund \$ _____

ENTER TOTAL AMOUNT DUE \$ _____

Payment Methods

CHECK – Return form with check made payable to:
Arizona Municipal Clerk's Association
1820 W Washington St, Phoenix AZ 85007

CREDIT CARD – Complete form on the following page.
Email completed forms to: league@azleague.org

Questions: AMCAInfo@azleague.org

ARTICLE II of the AMCA Constitution
Membership

Section A. **Full Members.** Any Arizona city/town clerk, assistant or deputy city/town clerk or other person who may serve as a municipal clerk and/or those with similar titles who serve government bodies in Arizona in administrative capacities with management responsibilities and duties that include four of the following, may become a Full Member by submitting an application and paying the applicable membership dues for the current year.

1. General management;
2. Meeting administration;
3. Elections administration;
4. Records management;
5. Custody of the official seal and execution of official documents;
6. Stewardship of by-laws, Articles of Incorporation, ordinances, resolutions, and other legal instruments;
7. Financial management;
8. Human resources management.

In no case shall a municipality have more than two Full Members.

Section B. **Associate Members.** This class of membership shall be available to any other governmental employee and IIMC members from other states who are interested in the activities and objectives of the Association by submitting an application and paying the applicable dues. An Associate Member has no voting rights except as provided in Section G of this Article but shall be eligible to serve in an elected office provided the associate member meets the requirements outlined in Article IV Section B of the AMCA Constitution. Associate Members may serve on, or chair, any committee of the Association.

Section C. **Retired Members.** This class of membership shall be available to former Full Members when they leave public employment by submitting an application and paying the applicable membership dues. A Retired Member has no voting rights and shall not be eligible to or serve in an elected office. A Retired Member may serve on, or chair, any committee of the association.

....

Section E. **Student Members.** This class of membership shall be available to students in colleges, universities and other educational organizations. Student Members shall pay nominal dues each year and shall be permitted to attend trainings at the member rate. Student Members have no voting rights and shall not be eligible to serve in an elected office. Student members may serve on, or chair, any committee of the association.

If you wish to pay by **CREDIT CARD**, fill out the form below. Return completed forms to league@azleague.org.

VISA **MASTERCARD** **AMERICAN EXPRESS**

CARD NUMBER

EXP. DATE

SECURITY CODE

NAME ON CARD

BILLING ADDRESS EXACTLY AS IT APPEARS ON STATEMENT

CITY, STATE, ZIP

(Credit card will be charged upon receipt.)