



ARIZONA COURTS ASSOCIATION

2010 MEMBERSHIP APPLICATION

NAME: _____
TITLE: _____
COURT: _____
ADDRESS: _____
CITY/STATE/ZIP: _____
TELEPHONE: _____ FAX: _____
E-MAIL ADDRESS: _____

MEMBERSHIP RENEWAL NEW MEMBER

Membership Type (check one): ___ Regular Membership \$25
 ___ Retired Membership \$25
 ___ Associate Membership \$25

I am interested in serving on the following committees/activities:

___ Legal Pad ___ Education ___ Membership ___ Audit
___ Membership Outreach ___ Conference ___ Vendor

Signature

Date

Note: Please send this completed form, along with \$25 membership dues, to:
The ACA Membership Secretary
P.O. Box 1689
Phoenix AZ 85001-1689

Annual membership is for the calendar year, January 1 through December 31. The Arizona Courts Association is an organization of all City, County, State, Appellate, Federal and Tribal Court personnel dedicated to improvement in all courts in the State of Arizona. (For additional information about ACA, please access the ACA web page at www.arizonacourtsassociation.org)