

The Arizona Courts Association 2018 Membership Application

| | |
|----------------|--|
| Name | |
| Title | |
| Court | |
| Address | |
| City/State/Zip | |
| Telephone | |
| Fax | |
| Email | |

MEMBERSHIP RENEWAL NEW MEMBER

Signature: _____
 Annual membership is for the calendar year: January 1 through December 31.

The ACA needs your help to make our organization even better!

Are you interested in becoming even more involved? Please let us know if you are interested in serving on any of the following committees:

- ACA POST Education Membership Audit
 Membership Outreach Conference Vendor

Suggestions:

The ACA is an organization of all City, County, State, Appellate, Federal and Tribal Court personnel dedicated to the improvement of all courts in the State of Arizona.

For additional information about ACA, please access our web page at:

www.arizonacourtsassociation.org

Membership Type:

Select one

- Regular \$30
- Retired \$30
- Associate \$30
- Business \$50

Send the completed form and payment to:

The ACA
 Membership Secretary
 P.O. Box 1818
 Florence, AZ 85132

2018
Spring Conference

April 25-27
Prescott Arizona

Watch our website for
details!

