

# Tampa Bay Public Risk Managers Association, Inc.

## New and Renewal Membership Application and Invoice

### CHAPTER MEMBERSHIP DUES FOR YEAR 2005

#### About Your Entity

Name of organization or company \_\_\_\_\_

Type of Business \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

Contact at e-mail address \_\_\_\_\_

*Please complete below in the appropriate category for each new member*

#### Government Entity Members

Designated Member \$25 - an entity may have only one designated (voting) member

Name \_\_\_\_\_ Title \_\_\_\_\_

Associate Members \$25 each - no limit

Name \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

#### Risk Management or Insurance Business, Corporate and Organization Affiliate Members

*\$50 each member - no limit*

Name \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

Total amount due for Chapter memberships from  
January 1, 2005 through December 31, 2005 \$ \_\_\_\_\_

Please make check payable to: Tampa Bay Public Risk Managers Association, Inc  
Federal EIN 59-3744363

Send to:  
Mr. John McCoy, Chapter Treasurer  
P.O. Box 173691  
Tampa, Florida, 33672