



The Ivy League for Assessors

MEMBERSHIP APPLICATION

Please return completed form with payment to:

**Society of Professional Assessors, Inc.
C/O Treasurer
PO Box 771
Westbrook, CT 06498-0771**

www.societyofassessors.org

Federal Tax I.D. No. 22-2849328

Please submit all the required information below. The membership period is July 1st through June 30th annually.

Membership Information

Name: _____ **Professional Title:** _____

Mailing Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Municipality/Firm: _____ **Website:** _____

Phone: _____

Fax: _____

Email: _____

- | | |
|--|---------|
| <input type="checkbox"/> Professional Member | \$25.00 |
| <input type="checkbox"/> Associate Member | \$15.00 |
| <input type="checkbox"/> Retired Member | \$10.00 |
| <input type="checkbox"/> Corporate Member | \$25.00 |
| <input type="checkbox"/> Affiliate Member | \$15.00 |

Please make check payable to: **Society of Professional Assessors, Inc.**