

2017-2018



Membership Application

Ohio Government Finance Officers Association

GFOA@AssnOffices.com ♦ www.ohgfoa.com

The Membership Year Begins on July 1 and ends on June 30.

MEMBER CONTACT INFORMATION:

Name: _____
 Company: _____
 Title: _____
 Address: _____
 City _____ State: _____
 Zip: _____
 Phone: _____
 Fax: _____
 Email: _____

Select Your Membership Dues Amount:

Dues are based on your governmental budget

Governmental

- ___ \$40 - Under \$6 million
- ___ \$60 - Under \$10 million
- ___ \$65 - \$10 - \$25 million
- ___ \$70 - Over \$25 million
- ___ \$20 - Associate (students, interns, retirees)

Non-Governmental

- ___ \$140 - For-Profit
- ___ \$70 - Non-Profit
- ___ State Agency
- ___ Special District (i.e. water districts, parks, etc.)
- ___ Non-Governmental
- ___ Non-Profit

Membership Category:

- ___ County
- ___ Library
- ___ Municipality/Village
- ___ Township
- ___ School District

Committee Interest: Volunteer to serve on an Ohio GFOA Committee!

- ___ Awards
- ___ Education
- ___ Legislative
- ___ Membership
- ___ Scholarship
- ___ Social
- ___ Sponsorship
- ___ Early Career Professionals

PAYMENT INFORMATION:

___ Enclosed is my check made payable to: **Ohio GFOA** (Tax ID#: 31-1229036)
 ___ Please charge my credit card: (___ MasterCard ___ Visa ___ Discover Card ___ American Express)
 Card # _____ Exp. Date: _____
 Name on the Card _____ 3-4 Digit Security Code: _____
 Billing Address (with zip): _____
 Authorized Signature: _____

Complete this form and remit payment to: Ohio GFOA, 17 S. High Street, Suite 200, Columbus, Ohio 43215
 P. 614.228.4727 ♦ F. 614.221.1989 ♦ GFOA@AssnOffices.com

ON-LINE MEMBERSHIP APPLICATION AVAILABLE AT: www.ohgfoa.com

revised 1.27.17