



Municipal Treasurers Association of Wisconsin

MTAW 2018 Dues Statement
Dues Year May 1 to April 30

PLEASE INDICATE MEMBERSHIP TYPE. ** New Member Renewal Member
\$55 Regular Member (Elected or appointed government position) elected appointed
Full time Part time*** ***Indicate average numbers of hours per week
I have earned my CMTW/ Yes No
\$525 Corporate Business rate for 10 or more Associate Members or
\$70.00 Associate Member (Business Member per person)
\$5 Retired Member/Treasurer at Heart
\$30 First Time Regular Member
\$0 Life Member (Honorary - conferred by Board of Directors)

Optional: Years of experience: Salary:

This information is being gathered for the Salary Survey Committee to share with members. Please consider providing this information.

PLEASE TYPE OR PRINT THE FOLLOWING INFORMATION.

Please Circle:

City, Town, Village of (or Company Name) Population

Name: Professional Designation(s):

Title:

Address:

City: State: Zip: County:

Phone: Fax:

E-mail:

RETURN THIS FORM WITH CHECK MADE PAYABLE TO:

MTAW
John Schlice, Executive Secretary
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715.997.9446 • mta-wi@att.net • www.mtaw.org