

**COUNTY REVENUE OFFICERS
ASSOCIATION OF ALABAMA
MEMBERSHIP APPLICATION**

Name _____

Title _____

County/Company _____

Address _____

City _____

State _____ Zip _____

Phone _____ Fax _____

Email _____

_____ **Regular Member** - Must be employed in an office responsible for any portion of the collection or enforcement of taxes or licenses at the county level. As a Regular Member you are entitled to vote on matters such as the election of CROAA officers and directors, the ratification of annual dues, and any amendments to the Association's by-laws.

_____ **Associate Member** - Individuals, companies, or corporations (involved in the collection of local taxes or licenses or who support the purposes and goals of the Association), elected officials, State of Alabama employees, or faculty and staff of a higher education institution. Associate Members shall enjoy all rights and privileges of regular members but may not hold office or vote on Association matters.

Membership dues are \$10 per year. Make check payable to:

County Revenue Officers Association of Alabama

Please send completed application and membership dues to:

ACCA • P.O. Box 5040 • Montgomery, Ala. 36103

Phone (334) 263-7594 • Fax (334) 263-7678