



ARIZONA ALFA

Independent Community Membership Application

Community Name: _____

Address: _____ City _____ St: _____ Zip: _____

County: _____ Phone: _____ Fax: _____

Email: _____ Website: _____

U.S. Congressional District#: _____ AZ Legislative District#: _____

CEO and/or Manager (Main Point of Contact)

Name: _____ Title: _____

Address (if different) _____

Phone (if different): _____ Fax (if different): _____ Email (if different): _____

Billing Contact (if different from main contact above)

Name: _____ Title: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

Is billing contact for a multiple campus facility/corporation? Yes No

Name of Corporation: _____

Annual Membership Fee: \$200

Remittance:

Check (payable to Arizona ALFA)____ Master Card____ Visa____

Card Number	Expiration Date
Billing Address/Zip Code for Card	Card Holder Name

Dues payments to Arizona ALFA are not tax deductible as charitable contributions for federal income tax purposes. Contributions or gifts to Arizona ALFA may be tax-deductible as ordinary and necessary business expenses (25% of dues fee is non-deductible as lobbying expenses).