



## Membership Application

NAME OF APPLICANT:		COMPANY:	
ADDRESS:			
CITY/STATE /ZIP CODE:			
PHONE NUMBER:		EMAIL:	

<b><u>Membership Type:</u></b>	<b><u>Cost</u></b>	<b><u>Total</u></b>
INDIVIDUAL MEMBERSHIP	\$50/year	
MUNICIPAL GROUP MEMBERSHIP	\$100/year	
CORPORATE GROUP MEMBERSHIP	\$150/year	

Please mail this form along with payment to:

**NH Public Works Association**  
 25 Triangle Park Drive  
 Concord, NH 03301