



MEMBERSHIP APPLICATION / RENEWAL

Name: _____ Title: _____

Organization: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

E-mail: _____

Membership Type: *(check one)*

_____ Corporate Champion (\$5800/year)

_____ Municipal Partner (varies by population)

_____ Corporate Partner (\$2900/year)

_____ Individual Member (\$395/year)

_____ Native American Communities (\$2900/year)

Corporate Champions, Municipal Partners, Corporate Partners and Native American Communities include a one-year membership for all employees within the organization.

Committees – I am interested in serving on the following committee(s): *(Circle all that apply)*

Economic Development

Emerging Leaders

Gateway Area & Aviation

Finance

Transportation

Membership/Board

Superstition Vistas

Government Relations

Development

Payment Information:

Please enclose a check payable to:

EAST VALLEY PARTNERSHIP

535 W. Baseline Road, Suite 107

(Federal Tax ID #86-0500306)

Mesa, AZ 85210

We also accept the following credit cards for payment: Visa, MasterCard, American Express, and Discover *(circle)*.

Name on Card: _____

Card #: _____ Exp. _____

We're pleased to have you on our team at the East Valley Partnership!

Fax: 480.325.2640 • Tel: 480.834.8335 • www.evp-az.org