January 2019

Thank you for your continued support of our Association, celebrating our 63rd Anniversary! The following is your 2019 Membership Application/Invoice Form. We have included the information as published last year. As in the past, you can choose an Individual or Group Membership as follows:			
Individual Memberships @ \$45.00 each =		\$	Total Enclosed
Group Membership (Includes 4) @ \$135.00 + \$40.00 €	ea. Additional =	\$	Total Enclosed
Vendors: Please see Ad Book Form for information on your Free Banner Ad			
Please be sure to fill out all information with check made Association & remit before January 31st, 2019 to:	de payable to the	South Suburt	oan Water Works
SSWWA Membership P.O. Box 150 Calumet City, IL 60409			
In the event that a formal invoice is required or if you h contact me directly.	ave any questions	s, please do r	not hesitate to
Thank you! Michael Giglio/Calumet City Plumbing ar@ccp1967.com SSWWA Membership Chair			
IF NO CHANGES PLEASE MARK HERE:	-		
CORRECTIONS/ADDITIONS:			
MEMBER NAME:	TITLE: _		
MUNICIPALITY/COMPANY NAME:			
ADDRESS:			
CITY:	STATE:	ZIP:	· · · · · · · · · · · · · · · · · · ·
TELEPHONE:	FAX:		
***E-MAIL ADDRESS REQUIRED***			
E-MAIL: WE	B PAGE:		