



"The Ohio Municipal Clerks Association advances the municipal clerk profession through education, networking and member benefits, which establishes clerks as experts in their field and leaders in the communities they serve."

OMCA MEMBERSHIP APPLICATION

(January 2018 – December 2018)

APPLICANT INFORMATION

Name:		Birthday: Month _____ Day _____	
Home Address:			
City:		State:	Zip Code:
Home Phone:	Home email (Optional)		

MUNICIPAL INFORMATION

Municipality:		Position:	
Address:			
City:	State:	Zip:	County:
Phone:	Fax:	Population:	City _____ Village _____
Email:		Appointed Mo/Yr _____ or Elected Mo/Yr _____	Region:
Charter: _____	Statutory: _____	Person Who Was Previously in Position:	

ADDITIONAL INFORMATION

Membership: (Circle One) New / Returning / Renewal		Member since: _____	Total Years in Municipal Service:
Are you a member of the International Institute of Municipal Clerks (IIMC) Yes _____ No _____			
If yes, have you earned your certification as a Certified Municipal Clerk (CMC) _____		Master Municipal Clerk (MMC) _____	
If not are you interested in earning your IIMC Certified Municipal Clerk (CMC) _____		Master Municipal Clerk (MMC) _____	
<input type="radio"/> I would like to serve on the OMCA Board. (Must be a member in good standing for two (2) years)			
<input type="radio"/> I would like to serve on an OMCA Committee. Committee(s) of interest:			

COMMITTEES: *Administrative, Communication, Legislative Review, Membership Services, Professional Development and Ways and Means*

MEMBERSHIP TYPE	DUES	AMOUNT
<input type="radio"/> Full Member (Clerk, Clerk Treasurer, Fiscal Officer, Director of Finance, Deputy Clerk/Assistant)	\$55.00	
<input type="radio"/> Associate Member (Employees in local government units, individuals in transit between municipal jobs and others at the discretion of the Board)	\$40.00	
<input type="radio"/> Retired Member	\$30.00	
<input type="radio"/> Honorary Member / Retired Past President	\$ 0.00	Complimentary
<input type="radio"/> Donation to the Marilyn J. McLaughlin Scholarship Fund	Optional	
TOTAL AMOUNT ENCLOSED		\$

Make Checks Payable To:
OMCA

Visit our website:
www.omca.us

Please send your application and payment to:
Ohio Municipal Clerks Association
175 South Third Street, Suite 510
Columbus, OH 43215
(614)-221-4349

FOR OFFICE
USE ONLY

Date Application Received