



**cooperative
communicators
association**

LEARN. LAUGH. LEAD.

174 Crestview Drive, Bellefonte, PA 16823-8516
Toll Free: 877-326-5994 ♦ Fax: 814-355-2452 ♦ E-mail: cca@communicators.coop
www.communicators.coop

CCA Membership Application

If you are involved in co-op communications, you belong in CCA.

The Cooperative Communicators Association invites you to join our organization, participate in the many activities offered and benefit from an affiliation with more than 350 communicators who speak your language.

When you make your membership investment in CCA, your benefits include:

- ✓ CCA E-newsletter twice a month
- ✓ E-mail bulletins on hot industry topics
- ✓ Communications "how to" resources on many topics
- ✓ Recognition through communication contests, industry honors and awards
- ✓ Networking resources such as the CCA membership directory, electronic discussion groups and regional groups
- ✓ Samples of co-op annual reports, newsletters, magazines and other communication materials
- ✓ Access to reports and presentations specific to your job

Name: _____ Title: _____

Co-op or Organization: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone (Business): _____ Phone (Other): _____ Fax: _____

E-mail: _____ Web site: _____

Communications specializations: _____

Years in cooperatives: _____ Type of Co-op or Organization: _____

MAC PC Software You Use: _____

Notice: Electronic communication is the most time-efficient and cost-effective method of transmitting important information about CCA. By supplying your e-mail and fax information, you are agreeing to accept electronic notices and news as part of your membership. In turn, CCA pledges to respect your privacy and will do its utmost to protect you from unsolicited communications by third parties.

MEMBERSHIP INVESTMENT: \$125 (US) (Our Federal ID #: 23-7248450)

TO MAIL your membership application, enclose check/money order made payable to CCA to: 174 Crestview Drive, Bellefonte, PA 16823-8516

TO FAX your membership application, provide credit card information below and fax form to the Business Office Fax: 814-355-2452

TO JOIN ONLINE Click on *Join CCA* at: www.communicators.coop

Credit Card Information: Visa MasterCard

Account Number _____ Exp. Date _____

Name on Account _____ Authorization Signature _____