

Phone: 978-263-1388 Fax: 978-263-1376

E-mail: <u>ipederson@masswaterworks.org</u>
Website: <u>www.masswaterworks.org</u>



Name:	
Title:	
Address:	
Employer:	
Employer Address:	
Preferred Mailing Address Home Work	
Daytime Phone:	
E-mail:	
Recommended By:	
If Applicable: Operator Certification Grade	
Operator License Number:	
Individual Membership: □ \$80—Active □ \$80—Affiliate □ \$35—Student	
An <u>Active</u> member of this association shall be an individual who is employed by a water department, district, company, or any other individual whose duties include water supply, distribution or administration. An <u>Affiliate</u> member of this association shall be an individual who is not directly associated with a a Public Water Sy A <u>Student</u> member is enrolled in High School, or post secondary education (i.e. College/ Graduate School)	
Utility Membership through the Utility Advantage Program (UAP) : Name of Participating Utility:	
 \$500—One Complimentary Membership One Complimentary Half Day Training Voucher 	
□ \$1,000—Two Complimentary Memberships	
Two Complimentary Half Day Training Vouchers ☐ \$2,000— Four Complimentary Memberships	
Four Complimentary Half Day Training Vouchers	
I wish to join the following committee(s):	
 □ Awards □ Education □ Program □ Legislative Advisory □ Technical Advisory □ PR/Membership □ Historical □ Scholarship □ Sponsorship □ Young Professionals □ Operator 	
I am an affiliate member who wants to support MWWA's advocacy and outreach initiative with	
enclosed: \$	the

Please send back the completed application to adminmwwa@masswaterworks.org
Check should be made out to: Mass Water Works Association - P.O. Box 1064 - Acton, MA 01720