

**CALIFORNIA CONTRACT CITIES ASSOCIATION
MEMBERSHIP APPLICATION AND ROSTER INFORMATION**

Name of person who
completed
form _____

CITY: _____
Address: _____ Zip Code: _____
Telephone: _____ Fax #: _____ E-Mail: _____
Business Days/Hours _____

MAYOR: _____ Term Ends: _____ Year: _____
Spouse: _____ Home Phone: _____
Residence: _____ Work Phone: _____
Business: _____ E-Mail: _____

VICE MAYOR/MAYOR PRO TEM: _____ Term Ends: _____ Year: _____
Spouse: _____ Home Phone: _____
Residence: _____ Work Phone: _____
Business: _____ E-Mail: _____

COUNCILMEMBER: _____ Term Ends: _____ Year: _____
Spouse: _____ Home Phone: _____
Residence: _____ Work Phone: _____
Business: _____ E-Mail: _____

COUNCILMEMBER: _____ Term Ends: _____ Year: _____
Spouse: _____ Home Phone: _____
Residence: _____ Work Phone: _____
Business: _____ E-Mail: _____

COUNCILMEMBER: _____ Term Ends: _____ Year: _____
Spouse: _____ Home Phone: _____
Residence: _____ Work Phone: _____
Business: _____ E-Mail: _____

**CITY ADMINISTRATOR/CHIEF ADMINISTRATIVE OFFICER/
CITY MANAGER:** _____
Spouse: _____ Home Phone: _____
Residence: _____ E-Mail: _____

CITY CLERK: _____
Spouse: _____ Home Phone: _____
Residence: _____ E-Mail: _____

CITY ATTORNEY: _____
Spouse: _____ Home Phone: _____
Residence: _____ Work Phone: _____
Business: _____ E-Mail: _____

COUNCIL MEETINGS: (When and Where) _____

Person to Contact for CCCA Meetings: _____
Population: _____ Assessed Valuation: _____ Date Incorporated: _____
Voting Delegate: _____ Alternate: _____

Our check in the amount of \$ _____ for annual membership dues, made payable to "California Contract Cities Association." Is being mailed to: California Contract Cities Association, 11027 Downey Ave., Downey, CA 90241. Membership year is July 1st through June 30th. No proration.

Click the Submit Via Email button once you have filled out the form in its entirety.

For more information, contact CCCA at (562) 622-5533, or check the website at www.contractcities.org.