

# South Carolina Association of Municipal Power Systems

## Associate Member dues

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Business name: \_\_\_\_\_

Main contact: \_\_\_\_\_

Full Name (example: William J. Smith, Jr.)  Mr.  Ms.  Dr.

Job title: \_\_\_\_\_

Unique identifier: Birth month  Birth day  Last four of SS #

*This combination of numbers is used as the individual's personal identification number to access online services, simplify event registration, and ensure proper recording of participation in Association training programs.*

Mailing address: \_\_\_\_\_

New Type:  Business  Home

City, state and zip: \_\_\_\_\_

Telephone number: \_\_\_\_\_

New Type:  Business  Mobile

Email address: \_\_\_\_\_

New

## Payment

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Membership dues: \$300

Meeting Sponsorship: \$ \_\_\_\_\_

Golf Sponsorship (*increments of \$125*): \$ \_\_\_\_\_

### Payment method

Check  MasterCard  VISA

If paying by credit card, please email or mail this form to Margie. She will process an invoice and will email you a secure payment link for you to use to pay with a credit card. Margie Wingard ([mwingard@masc.sc](mailto:mwingard@masc.sc) and 803.933.1276)

Make checks payable to SC Association of Municipal Power Systems.

Mail payment and completed forms to

SCAMPS ♦ PO Box 12220 ♦ Columbia, SC 29211

Do not email credit card numbers.

Membership term: **May 1, 2018 – April 30, 2019**