



TEXAS ASSOCIATION OF MUNICIPAL INFORMATION OFFICERS

### Membership Application

Name: \_\_\_\_\_

Title: \_\_\_\_\_

City/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_

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

Referred by: \_\_\_\_\_

**Please choose the membership that applies to you and if you wish to receive the TML Magazine:**

General Membership	\$85	_____
Affiliate Membership	\$85	_____
Associate Membership	\$170	_____
Student Membership	\$42.50	_____
Legacy Membership	\$42.50	_____
Agency Membership	\$255	_____
TML Magazine	\$30 each	
Total Remitted:		_____

[For Agency Memberships, please fill out the following pages]

For Agency Memberships Only

**Member #2**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

City/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_

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

**Member #3**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

City/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_

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

**Member #4**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

City/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_

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

**Member #5**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

City/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_

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

**TAMIO**

1821 Rutherford Ln., Suite #400

Austin, TX 78754

512-231-7400