



# Maine Cemetery Association

## APPLICATION FOR MEMBERSHIP

NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

CEMETERY OR COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

CEMETERY CATEGORY (CHECK ONE)

PRIVATE \_\_\_\_\_ MUNICIPAL \_\_\_\_\_ RELIGIOUS \_\_\_\_\_ OTHER \_\_\_\_\_

(FOR NON-CEMETERIANS) BRIEFLY DESCRIBE YOUR COMPANY'S PRODUCTS AND OR SERVICES.

\_\_\_\_\_  
\_\_\_\_\_

CLASS OF MEMBERSHIP APPLIED FOR: (SEE BELOW)

REGULAR MEMBER \_\_\_\_\_ ASSOCIATE MEMBER \_\_\_\_\_

**PLEASE ENCLOSE FIRST YEAR'S DUES (\$50.00) AND MAIL TO:**

Joanne Mason, MCA Secretary/Treasurer  
P.O. Box 1211  
Auburn, ME 04211

The Association shall consist of three (3) classes of members. These shall be Regular Members, Associate Members and Honorary Members. Regular Members shall be those who are actively engaged in the management or supervision of a Maine Cemetery. They shall have the right to vote, be eligible to hold office, and pay Association dues. Applicants for this class of membership must have a minimum of six (6) Month's experience and must be sponsored by a Regular Member. Associate Members shall be those who are engaged in an allied industry or profession. They shall pay Associate dues, but shall have no vote nor eligible to hold office. Applicants for this class of membership must also be sponsored by a Regular Member. Applicants for Regular or Associate Membership must be approved by the membership committee. Honorary Members may be elected on recommendation of the Membership Committee and shall be persons whom the Membership Committee deem worthy of the distinction. Honorary Members shall have no vote and shall not be subject to dues.