



Membership Form

To start or renew your membership in SDCPA, simply complete the membership form below, enclose payment and send to:

Grant Uecker, SDCPA Treasurer
Mitchell Technical Institute
821 North Capital
Mitchell, SD 57301

Membership dues are as follows:

- Institutional (Includes two memberships.): \$50.00—Each additional membership is \$20.00.
- Individual (General and Affiliate): \$20.00
- Associate (Support Staff, Students, and Retired Members): \$15.00

Please enter my membership for (check all that apply):

- Renewal New Membership
- Institutional Individual Associate

Submit the information below for each member. (Please print clearly.)

Include additional pages, if needed.

- First Member

Name:

Title:

Institution:

Phone Number:

Mailing Address:

E-mail:

Number of Years as an SDCPA Member:

- I am a seasoned member of SDCPA and am interested in serving as a mentor to a new member. (If you check this box, one of the Executive Board members will contact you about what this opportunity entails.)
- I am interested in earning CEU's at SDCPA conferences.
- I would like my contact information to be restricted for membership viewing only. (The SDCPA membership directory currently is posted on the SDCPA website. Check this box if you would like your directory information restricted for "members only" viewing.)

Second Member

Name:

Title:

Institution:

Phone Number:

Mailing Address:

E-mail:

Number of Years as an SDCPA Member:

I am a seasoned member of SDCPA and am interested in serving as a mentor to a new member. (If you check this box, one of the Executive Board members will contact you about what this opportunity entails.)

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In the space below or on an additional page, submit ALL the requested information for each additional member. (Please print clearly.)

If you are a new member and a current member referred you to the organization, please list that person's name: _____