



# Agency Membership Application

**\*Available to Municipalities, Counties, Towns, Villages, and Community Associations\***

**Agency Membership** entitles an agency to register up to twelve (12) members with the Texas Recreation and Park Society, ten (10) of which must be individuals that are city officials, board or commission members and up to, and no more than two (2) professionals, which must include the Director and may include one other designee of the agency. If no director is listed for membership, you cannot list a professional designee for membership. You may also choose to list only board/commission and/or city officials. Each registered member listed under the agency will receive the *Texas Talk Newsletter*, and the Quarterly *TRAPS Magazine*. The Director and the Professional Designee will also receive the *Membership Directory and Buyer's Guide*, and be entitled to two (2) votes for elections and general membership votes. Should you choose not to list your Director and a professional Designee, the two directory's will go to the Board/Commission Chair and the highest ranking City Official; however, no votes will be given. Should you have more than the allotted commission/board/city officials and want to list them, each additional member may be added at a cost of \$35.00/individual.

**ANNUAL DUES: \$600.00 (regardless of population served)**

Agency _____	# of Full Time Employees _____
County _____	# of Seasonal Employees _____
Population Served	Total Number of Acres Owned _____
<input type="checkbox"/> Less than 25,000	Legislative District # and Names
<input type="checkbox"/> 25,001 to 50,000	TX House _____
<input type="checkbox"/> 50,001 to 100,000	TX Senate _____
<input type="checkbox"/> 100,001 to 250,000	US House _____
<input type="checkbox"/> More than 250,000	

## Director

(must complete regardless of whether included in membership)

Include in membership ☐ Yes ☐ No

Name \_\_\_\_\_

Certification(s) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-Mail \_\_\_\_\_

## Additional Professional Designee (if applicable)

Name \_\_\_\_\_

Title \_\_\_\_\_

Certification(s) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-Mail \_\_\_\_\_

Please list commission/board/city officials on the form provided, or you may attach a list if you so choose. Remember, there is only room for 12 members should you have more you will need to attach a separate form.

**Please mail form and check to: Texas Recreation & Park Society, PO Box 5188 Jonestown, TX 78645. Make check payable to the Texas Recreation and Parks Society (TRAPS). Sorry, NO Purchase Orders will be accepted.**

<b>Credit Card Information</b>			<b>For Office Use Only:</b> Authorization # _____
<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Discover	
Name on Card _____			
Address _____		City _____	Zip _____
Card Number _____		Expiration Date _____	
Signature _____		Email for receipt _____	

# Commission/Board/City Official List

**Chair/Vice-Chair/City Official** -please indicate which one  
(Will receive directory if director/professional designee not added)

Name\_\_\_\_\_

Title\_\_\_\_\_

Mailing Address\_\_\_\_\_

City,State,Zip\_\_\_\_\_

Phone\_\_\_\_\_ Fax\_\_\_\_\_

E-Mail\_\_\_\_\_

Name\_\_\_\_\_

Title\_\_\_\_\_

Mailing Address\_\_\_\_\_

City,State,Zip\_\_\_\_\_

Phone\_\_\_\_\_ Fax\_\_\_\_\_

E-Mail\_\_\_\_\_

Name\_\_\_\_\_

Title\_\_\_\_\_

Mailing Address\_\_\_\_\_

City,State,Zip\_\_\_\_\_

Phone\_\_\_\_\_ Fax\_\_\_\_\_

E-Mail\_\_\_\_\_

Name\_\_\_\_\_

Title\_\_\_\_\_

Mailing Address\_\_\_\_\_

City,State,Zip\_\_\_\_\_

Phone\_\_\_\_\_ Fax\_\_\_\_\_

E-Mail\_\_\_\_\_

Name\_\_\_\_\_

Title\_\_\_\_\_

Mailing Address\_\_\_\_\_

City,State,Zip\_\_\_\_\_

Phone\_\_\_\_\_ Fax\_\_\_\_\_

E-Mail\_\_\_\_\_

Name\_\_\_\_\_

Title\_\_\_\_\_

Mailing Address\_\_\_\_\_

City,State,Zip\_\_\_\_\_

Phone\_\_\_\_\_ Fax\_\_\_\_\_

E-Mail\_\_\_\_\_

**Chair/Vice-Chair/City Official** -please indicate which one  
(Will receive directory if director/professional designee not added)

Name\_\_\_\_\_

Title\_\_\_\_\_

Mailing Address\_\_\_\_\_

City,State,Zip\_\_\_\_\_

Phone\_\_\_\_\_ Fax\_\_\_\_\_

E-Mail\_\_\_\_\_

Name\_\_\_\_\_

Title\_\_\_\_\_

Mailing Address\_\_\_\_\_

City,State,Zip\_\_\_\_\_

Phone\_\_\_\_\_ Fax\_\_\_\_\_

E-Mail\_\_\_\_\_

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E-Mail\_\_\_\_\_