



Envisioning a state where all people and communities thrive.
Be a part of bringing the vision to life!

Join MACA Now!

Salary	Dues Rate
Up to & including \$21,000	0.25%
Over \$21,000	0.33 %

That is only \$0.25 or \$0.33 for each \$100.00 of your salary!

****Method of Payment: All membership dues are to be paid through your agency by payroll deduction.**

Name _____

Agency _____

Job Title _____ Employee ID# _____

E-mail (work) _____

E-mail (home if preferred) _____

Home Address _____

City _____ State _____ Zip _____

I hereby give my authorization for MACA dues to be deducted at the rate indicated above. I understand my dues will be adjusted as my salary changes.

Signature _____ Date _____

RETURN THIS FORM TO THE APPROPRIATE PERSON IN YOUR AGENCY FOR PROCESSING!

THIS FORM MUST BE COPIED BY THE HR DEPARTMENT AND THE COPY SENT TO MACA FOR THE MEMBERSHIP ENROLLMENT TO BE COMPLETE. THANK YOU FOR YOUR HELP. (Please delete or remove ID# before sending us the form if it is the person's Social Security number.)

Missouri Association for Community Action
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