

Corporate Member # 3

Mr. Ms. _____
First Member #3 Middle Member #3 Last Member #3

Title _____

Phone (Area Code) # Ext. Fax (Area Code) # E-mail

Are you CPP Certified?: Yes No No, but I am interested in a CPP review class

Please indicate any committees you would like to participate in:

Education Membership Communications Board National Payroll Week

How did you (company) hear about the Colonial Capital Chapter?

National APA Another APA Chapter Chapter Name: _____
 Another Member Other

Membership Dues: Please mark your CCCAPA membership selection.

- Member** \$40.00 Method of Payment: Cash, Check or Money Order
- Corporate Member** \$80.00 **Be sure to complete the additional member information**
- Free Certificate** \$0.00

Please make check payable to: **CCCAPA**

Mail completed application & payment to:
Colonial Capital Chapter Treasurer
PenSoft
151 Enterprise Drive
Newport News, VA 23603

Signature _____

Date _____

For more information, contact Dana Jones ddjones@williamsburgva.gov or Stephanie Salavejus ssalavejus@pensoft.com