

CONNECTICUT FEDERATION OF PLANNING & ZONING AGENCIES

APPLICATION FOR MEMBERSHIP

Please complete this form for admission as a member of the Connecticut Federation of Planning and Zoning Agencies

_____ of _____
(Name of agency/organization) (Municipality)

Payment of \$ _____ for such membership is attached: _____
will be forwarded: _____

Date: _____

(Signed)

(Title)

(Address and Zip Code)

DUES

Full Year Membership	\$ 110.00
Half Year Membership (After October 1)	\$ 55.00

Because of conflicting interests each municipal agency must be covered by a separate membership (i.e. Planning and Zoning Commission membership does not extend to the Zoning Board of Appeals).

Fiscal year begins on April 1. Application dated on or after October 1 may be accompanied by one-half of the annual dues.

Checks should be made payable to:

The Connecticut Federation of Planning and Zoning Agencies
790 Farmington Ave., Suite 2B
Farmington, CT 06032