



# OAMCCC

## 2021 VENDOR / AFFILIATE MEMBERSHIP FORM

### ANNUAL DUES FOR VENDORS / AFFILIATE MEMBERS

Any individual, business, or organization:

**\$125 for year 2021 only (This is 50% off of the \$250 annual dues)**

BUSINESS NAME: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

\_\_\_\_\_

(city, state & zip)

PHONE: (\_\_\_\_) \_\_\_\_\_ FAX: (\_\_\_\_) \_\_\_\_\_

CONTACT EMAIL: \_\_\_\_\_

### MEMBER NAMES AND TITLES

(Please list all individuals you wish to include for membership)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Please submit this form and check made payable to OAMCCC to:

**Mail:** **OAMCCC**  
**c/o Marianne Collins**  
**Association Strategies, Inc.**  
**423 Hickory Ln**  
**Westerville OH 43081**

**Contact:** [mcollins@associationstrategiesinc.com](mailto:mcollins@associationstrategiesinc.com)  
(614) 440.9229 Phone  
(614) 675-9895 Fax

**Note: Form may be emailed or faxed, with follow-up check by mail.**