



# MAFSM

Maryland Association of Floodplain and Stormwater Managers

## Membership Application and Renewal Form

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Employer/Agency: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Ext. \_\_\_\_\_

Fax: \_\_\_\_\_ Home (Opt): \_\_\_\_\_

E-mail: \_\_\_\_\_

**Affiliation:**  Local Government  State Government  Federal Government  
 Private  Academic  Other

**Nature of Duties:**  Engineering  Mapping  Planning  Administration  
 Environmental  Insurance  Policy  Other

**Committee Interests:**  Mapping & Technology  Membership  Mitigation  Newsletter  
 Programs  Public Outreach  Stormwater Management

New Member  I do not wish to have my contact information  
 Renewal published in the membership list

### Dues Schedule January 1 – December 31

Full Membership \$30

Associate Membership \$20 (Full Membership includes voting rights, whereas an Associate Member can not vote on issues concerning the association)

Corporate Sponsor \$500 (Corporate sponsor dues include five (5) full memberships)

*Please make checks payable to Maryland Association of Floodplain and Stormwater Managers (or) MAFSM.*

*And mail completed application and dues to:*

Maryland Association of Floodplain and Stormwater Managers (MAFSM)  
C/o Greenhorne & O'Mara  
6110 Frost Place  
Laurel, MD 20707  
ATTN: Barbara A. Litten (Membership)

**For all inquiries please enter 'MAFSM Membership' in the subject line and send them to: [MAFSM13@gmail.com](mailto:MAFSM13@gmail.com)**