

**Texas CIT Association
Membership Application**

Applicants must complete the information below.
Membership is good for one year and expires annually on December 31st.

DUES: NEW: _____ RENEW: _____ **Date:** _____

REGION: (Please check one) North _____ South East _____ West _____
South Central _____ North Plains _____ Central _____

Professional \$40.00 Organizational (Supporter) \$100.00 Consumer/family \$10

Membership type: Professional _____ Organization _____ Consumer/Family _____

Last Name: _____ First Name: _____ MI: _____

Rank/Title _____

Mailing
Address: _____

Organization/Agency/Employer:

Business Phone: () _____ Contact Phone: () _____

Email: _____

Payment Information:

Check # _____

Credit Card Information:

Type of card (VISA/MC) _____ Credit Card Number: _____

3 digit security code on back of card: _____ Expiration Date: _____

Please submit application to:
Texas CIT Association
c/o Brandy Leonhardt
PO Box 1808
Richmond TX 77406