



**Florida  
Animal  
Control  
Association**

## 2020 DUES INVOICE

### APPLICATION FOR AGENCY MEMBERSHIP

*Agency membership is open to any Florida Animal Control Agency, Code Enforcement Agency, Law Enforcement Agency, or Government-contracted organization providing animal control that enforces local and/or Florida State statutes related to animal regulations.*

Please accept our application for membership in the FLORIDA ANIMAL CONTROL ASSOCIATION. We support its mission and wish to receive its communications and benefits as a full voting member.

AGENCY: \_\_\_\_\_

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

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

COUNTY: \_\_\_\_\_ PHONE ( \_\_\_\_\_ ) \_\_\_\_\_

PRIMARY EMAIL ADDRESS: \_\_\_\_\_

*(To be used in FACA Member Directory and website login for all agency employees)*

#### HEAD OF AGENCY

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

TITLE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

PHONE NUMBER: ( \_\_\_\_\_ ) \_\_\_\_\_

**CHECK THE CATEGORY that corresponds to your number of employees.**

- \_\_\_ \$70 flat fee for agencies of 1-5 employees
- \_\_\_ For 6 – 10 employees                      \$20 PER EMPLOYEE Regular Membership
- \_\_\_ For 11 – 25 employees                    \$15 PER EMPLOYEE Regular Membership
- \_\_\_ For 26 – 50 employees                    \$12 PER EMPLOYEE Regular Membership
- \_\_\_ For 51 – 100 employees                   \$10 PER EMPLOYEE Regular Membership
- \_\_\_ For over 100 employees                    \$ 8 PER EMPLOYEE Regular Membership

TOTAL DUE: \$ \_\_\_\_\_

CHECK enclosed

CHARGE MC/VISA/AmEx # \_\_\_\_\_

EXP date: \_\_\_\_\_ 3-digit SECURITY CODE: \_\_\_\_\_

NAME on card: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

***THANK YOU for your commitment to your professional association.***

**PLEASE PROVIDE THE POSITION TITLES AND THE NUMBER OF EMPLOYEES IN EACH POSITION.** ALL EMPLOYEES must be members; including all enforcement & shelter workers, excluding strictly administrative personnel (i.e. bookkeepers, office janitors, etc.). FACA does not need the specific employee names, as these change due to turnover, but does need to know how many employees your agency is budgeted for in each position. If you currently have vacancies that you expect to fill during the year covered by this membership then include that number even if currently vacant.

***PLEASE PRINT***

POSITION: _____	HOW MANY? _____
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**REMIT TO:** **FLORIDA ANIMAL CONTROL ASSOCIATION**  
**P.O. Box 211267**  
**Royal Palm Beach, FL 33421**

**OR via EMAIL:** [\*\*info@floridaanimalcontrol.org\*\*](mailto:info@floridaanimalcontrol.org)

**OR via FAX:** **(561) 249-0422**