



Massachusetts Association of Assessing Officers

Established 1890 Incorporated 1980

APPLICATION FOR REGULAR MEMBERSHIP

Per the MAAO By-laws, Article IV – Dues, Section 3 - Regular Membership: The annual dues for Regular Membership is based upon the community in which you are employed. The annual dues shall be as follows:

Population of the municipality of the member	Primary Regular Member	Each Additional Regular Member
1 to 2,399	\$35.00	\$20.00
2,400 to 6,799	\$45.00	\$25.00
6,800 to 12,999	\$70.00	\$25.00
13,000 to 24,999	\$110.00	\$35.00
25,000 and above	\$150.00	\$45.00

Type of Regular Membership you are applying for (*please check one*):

- Any person elected or appointed as an Assessor.
- Any person gainfully employed as an Assistant to the Assessors by a municipality in the Commonwealth of Massachusetts, as provided by Chapter 41, Section 25A of the General Laws, regardless of the local title of his or her position, who works regularly scheduled hours for financial compensation and who is responsible for assisting the Board of Assessors in the administration of the tax laws of the Commonwealth, and the determination of real and personal property values, and who has taken an oath to administer said laws, shall be eligible for Regular Membership. Regular Members and Honorary Members shall be the only voting members.
- Any person gainfully employed by a municipality in the Commonwealth of Massachusetts, regardless of the local title of his/her position, who works regularly scheduled hours for financial compensation and who is responsible for assisting the Board of Assessors in the administrative process associated with the determination of real and personal property values. Provided, that said person's duties are verified by the Head of the Assessors Department as being an integral part of the process used for the determination of value. The Department Head shall make verification for members of this category of membership, in writing, to the Secretary of the M.A.A.O.

(Please type or print legibly)

<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.(check one)	Last Name:	Suffix:
First Name:		M.I.:
E-mail (primary to receive correspondents):		

Work Address:

Municipality:		
Address:		
City:	State:	Zip:
Work Phone Number:	Fax Number:	

Home Address:

Address:		
City:	State:	Zip:
Home Phone Number:		
Preferred Mailing Address (check one): <input type="checkbox"/> Work <input type="checkbox"/> Home		

Please fill out the form and return it with a check to:

M.A.A.O.
P. O. Box 70
Shrewsbury, MA 01545

If you have any questions regarding the MAAO Dues or Membership, please refer to the MAAO Web Site at www.maa.org.