



Pennsylvania State Mayors' Association

State Headquarters

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PSMA MEMBERSHIP INFORMATION

Please provide as much information as possible to assist the PSMA in communicating with you.

Name _____

Municipality _____

County _____

Municipal Address:

Home Address:

E-mail address _____ Fax # _____

Preferred mailing address: municipal ____ home ____ e-mail ____ fax # ____

Cell phone # _____ Municipal phone # _____

Home phone # _____ Work phone # _____

Preferred phone #s: cell ____ home ____ municipal ____ work ____

What can the PSMA do to better serve you: _____

Your 2017 Membership Dues are \$60.00. Please make your check payable to the PSMA and mail to PSMA, 5200 Brightwood Road, Bethel Park, Pennsylvania 15102.