



OREGON PERMIT TECHNICIANS ASSOCIATION MEMBERSHIP APPLICATION

Membership dues are based on the calendar year due February 28th of each year.

MEMBERSHIP APPLICATION FORM

NEW

RENEWAL

MEMBERSHIP INFORMATION

Name of Jurisdiction or Organization:

Individual Name:

Position Title:

Address:

City:

State:

Zip:

Business/Daytime Phone:

Email Address (required):

___ # of members represented for your Jurisdiction / Organization – Must provide separate application for each member

List the name of (1) Voting Representative for your Jurisdiction or Organization:

Voting Representative's Email:

MEMBERSHIP FEES

GOVERNMENTAL - AFFILIATED W/ MUNICIPALITY or ASSOCIATE - NOT AFFILIATED W/ A MUNICIPALITY

Governmental Membership

Associate Membership

(1-3 persons) \$40.00 each

(4 to 10 persons) \$150.00

(11 or more persons) \$175.00

Retired Membership - \$30.00 each

Honorary Membership - (Approved by OPTA Board of Directors) - No Membership Fee

ICC AFFILIATION INFORMATION

ICC Permit Technician Certified?

Yes

No

Certification #

ICC Member?

Yes

No

Membership #

SPONSORSHIP

Sponsors will be recognized at the annual meeting. Your sponsorship will help defer the cost of training and education.

Our organization, _____ wishes to sponsor \$ _____ to OPTA

EMAIL PREFERENCES

Please select the type of emails you would like to receive

Conferences/Classes

OPTA News

Planner/Inspector/Plans Examiner Job Openings

Code Questions

Permit Tech Job Openings

Emergency Assistance Requests

Please do not include me on any emails

COMMITTEE INVOLVEMENT – SPECIAL INTERESTS

If you are interested in becoming more involved in OPTA, here's your chance. Select one or more of the committees you are interested in and a Committee Chair will contact you to provide you with information about the committee and discuss level of involvement you wish to participate.

Membership Outreach

Education

Bylaws

Community Outreach

I am interested in attending OPTA meetings and would like to receive meeting notifications

Special Interests/Skills you would like to like to contribute to OPTA:

PAYMENT INFORMATION

Check (Payable to OPTA)

Check # _____

PayPal (Please attach payment receipt with application)

REGISTRATION OPTIONS

Mail - Mail Applications to PO Box 634, Springfield, OR 97477

Email - Email Applications to info@oregonpermittechs.com and pay online at www.oregonpermittechs.com with PayPal **Online**.