

APPLICATION FOR MEMBERSHIP



Section 1: Information

Applicant Name _____ Date _____

Company Name _____ Year Founded _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____ Website _____

General Manager _____ Email _____

Board President or Chair _____ Email _____

of Connections _____ # of Wells _____ # of Homes Served _____ # of Businesses Served _____

Annual Revenues _____

May we use your company's name and logo on our website and publications: ☐ Yes ☐ No

Section 2: Select Dues Level (Please check one)

REGULAR MEMBERS (any duly created business entity operating in California as a mutual water company)

☐ TIER D: Annual revenues up to \$100,000 - **\$50/year**

☐ TIER C: Annual revenues \$100 K - \$1 M - **\$250/year**

☐ TIER B: Annual revenues \$1 M - \$4 M - **\$500/year**

☐ TIER A: Annual revenues over \$4 M - **\$1,000/year**

AFFILIATE MEMBERS (non-mutual water company water suppliers and non-potable drainage, reclamation, or conservation districts)

☐ Public Water Systems TIER D: Annual revenues up to \$100,000 - **\$50/year**

☐ Public Water Systems TIER C: Annual revenues \$100 K - \$1 M - **\$250/year**

☐ Public Water Systems TIER B: Annual revenues over \$1 M - **\$500/year**

☐ Non-Potable Districts - **\$100/year**

www.calmutuals.org