

PROVIDING A VOICE FOR NORTHEAST COLORADO



ADAMS ARAPAHOE CHEYENNE DOUGLAS ELBERT  
KIT CARSON LARIMER LINCOLN LOGAN MORGAN  
PHILLIPS SEDGWICK WASHINGTON WELD YUMA

# MEMBERSHIP APPLICATION

Referred by: \_\_\_\_\_

Date: \_\_\_\_\_

### INFORMATION:

Name: \_\_\_\_\_

Organization: \_\_\_\_\_

If Applicable: # of Employees \_\_\_\_\_ or Population (City/County) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: **CO** Zip: \_\_\_\_\_ County: \_\_\_\_\_

Contact Telephone Number: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E mail: \_\_\_\_\_ Website (n/a for individual memberships): \_\_\_\_\_

Facebook: \_\_\_\_\_ Twitter: \_\_\_\_\_ Other: \_\_\_\_\_

Additional People Who Should Receive Newsletters/Updates:

NAME \_\_\_\_\_ E MAIL \_\_\_\_\_

NAME \_\_\_\_\_ E MAIL \_\_\_\_\_

NAME \_\_\_\_\_ E MAIL \_\_\_\_\_

### I WOULD LIKE TO BE INVOLVED IN THE FOLLOWING ISSUE DISCUSSIONS:

<input type="checkbox"/>	BUSINESS & LABOR	<input type="checkbox"/>	AG, WATER, NATURAL RESOURCES
<input type="checkbox"/>	TRANSPORTATION	<input type="checkbox"/>	EDUCATION
<input type="checkbox"/>	ENERGY	<input type="checkbox"/>	HEALTH & HUMAN SERVICES

### MEMBERSHIP TYPE:

<input type="checkbox"/>	\$125 Individual	<input type="checkbox"/>	\$225 Schools	<input type="checkbox"/>	\$225 Business (1-10 employees)	<input type="checkbox"/>	\$375 Business (11-50 employees)
<input type="checkbox"/>	\$525 Business (51-100)	<input type="checkbox"/>	\$1250 Business (101-200)	<input type="checkbox"/>	\$2500 Business (200+ )	<input type="checkbox"/>	Cities: .06 cents per capita
<input type="checkbox"/>	Counties: .10 cents per capita counties	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/>	Chairman's Circle	<input type="checkbox"/>	\$5000 (call for details)	<input type="checkbox"/>		<input type="checkbox"/>	

**AMOUNT ENCLOSED:** \$ \_\_\_\_\_ Make Check payable to Progressive 15 and Mail to: 629 Warner Street, Fort Morgan, CO 80701

**CREDIT CARD:** \$ \_\_\_\_\_ Pay online at [www.pro15.org](http://www.pro15.org) under membership section through PayPal or call w/credit card number to 970-867-9167 Then - Fax application to: 1-800-521-9413