



# Georgia Rural Water Association

P.O. Box 383 Barnesville GA 30204 Phone: 770-358-0221 / Fax: 770-358-4379  
E-Mail: grwa1@grwa.org / Website: GRWA.ORG

## Associate Membership Application

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Company Website: \_\_\_\_\_

Primary Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Primary Contact E-Mail: \_\_\_\_\_

Primary Contact Phone: \_\_\_\_\_

### List Additional Representative(s) from Your Company to Receive GRWA Mailings / Notifications

Name: \_\_\_\_\_ Title: \_\_\_\_\_ E-Mail: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ E-Mail: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

To Add Additional Company Representatives Please E-Mail A Request to: [grwa1@grwa.org](mailto:grwa1@grwa.org)

List Products / Services That Your Company Provides: \_\_\_\_\_

## Annual Associate Membership Dues \$350.00 (Includes All Company Employees)

Make Check Payable to:  
Georgia Rural Water Association  
P.O. Box 383  
Barnesville, GA 30204  
Federal Tax ID #: 58-1373517

Credit Card: \_\_\_ Visa \_\_\_ Mastercard \_\_\_ American Express \_\_\_ Discover

Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Thank You for Your Support