

Michigan Public Employer Labor Relations Association Membership Application

MPELRA Membership Eligibility Requirements

The MPELRA Bylaws provide that general membership is open to any person whose preponderant duties are to represent the interest of a governmental employer or a non-profit employer engaged primarily in providing service to the public.

Name of Employer: _____
(Print or Type)

Membership Type: (Check One Box Only)

Agency Membership Fee **\$150.00** (Annual fee - permits up to **four (4) people** from the same employer to enroll as members. Use one application form for each agency membership.)

Individual Membership Fee **\$50.00** (Annual fee per person)

Member 1	Member 2
Name: _____	Name: _____
Title: _____	Title: _____
Address: _____	Address: _____
City: _____	City: _____
State/Zip: _____	State/Zip: _____
Telephone Numbers	Telephone Numbers
Bus: _____ Fax: _____	Bus: _____ Fax: _____
Email: _____	Email: _____
Member 3	Member 4
Name: _____	Name: _____
Title: _____	Title: _____
Address: _____	Address: _____
City: _____	City: _____
State/Zip: _____	State/Zip: _____
Telephone Numbers	Telephone Numbers
Bus: _____ Fax: _____	Bus: _____ Fax: _____
Email: _____	Email: _____

Please make check payable to **MPELRA**

Mail this form and your membership fee to:

MPELRA
P. O. Box 235
Farmington, MI 48332-0235

You can also join MPELRA on line: www.mpelra.org

For MPELRA Use Only	
Membership Type: _____	No. of Members: _____
Check Date: _____	Check No. _____
Check Amount: _____	Deposit Date: _____
Processed by: _____	Date: _____