



South Carolina Mitigation Association

Membership Application / Renewal

Member Contact Information

Company Name: _____

Address: _____

Telephone: _____ Fax: _____

Website: _____

Consultant Banker Contractor Non-Profit Other: _____

Primary Contact:

Name: _____

Title: _____

Email: _____

Secondary Contact:

Name: _____

Title: _____

Email: _____

Please list other names that should be added to the email lists:

Dues: Member Level

Voting Member \$1,000

Non-Voting Member \$400

Payment Authorized:

Form of Payment: Check Visa MC AmEx

Credit Card # _____ Expiration Date _____

Signature _____ CVV _____

A 3.5% convenience fee will be applied to credit card transactions. You may avoid this fee by paying with a check.

Thank you for your support.

PO Box 1763 | Columbia, SC 29202

Tel: (803) 252-1087 | Fax: (803) 252-0589 | info@scmitigation.org | www.scmitigation.org