

MAINE GROUND WATER ASSOCIATION
APPLICATION FOR MEMBERSHIP

ACTIVE MEMBERSHIP: Any resident of Maine, who has a current State of Maine Master Water Well Drillers license or who is active in the daily operations of a corporation, partnership, or sole proprietorship, engaged in the ground water industry in Maine, that owns and operates water well drilling equipment, and shows proof of ownership in said corporation, partnership, or sole proprietorship may become an Active member upon the acceptance of this application for membership from The Board of Directors of this Association and upon payment of required dues, subject to the limitation that only three such owners of stock, or only three members of a partnership, who do not have Master Water Well Drillers licenses, may become Active Members. Applicants for Active membership must attach a copy of their current Maine Water Well Drillers Commission license or a copy of an IRS form listing the owners of above corporation, partnership, or sole proprietorship with this application.

AFFILIATE MEMBERSHIP: Any individual whose employment is primarily engaged in the ground water industry in The State of Maine.

ASSOCIATE MEMBERSHIP: Any corporation or company with any interest in the ground water industry.

Dues will be payable upon the acceptance of this application and an invoice will be mailed.

I do hereby apply for Active , Affiliate , or Associate membership (check one) in the Maine Ground Water Association.

I swear and affirm that I will abide by the Constitution and Bylaws of this Association and by the Constitution and Bylaws of the National Ground Water Association. I further promise to live up to any code of Ethics adopted by this Association and conduct myself and my business in such a way as not to injure a fellow member or cause embarrassment to this Association. I will notify the Association of any change in my status affecting my qualifications for membership that I hold in this Association.

DATE: _____

PRINT NAME OF APPLICANT

SIGNATURE OF APPLICANT

COMPANY NAME

POSITION

MAILING ADDRESS,

CITY,

STATE

ZIP CODE

PHONE NUMBER

FAX NUMBER

E-MAIL ADDRESS

MOBILE NUMBER

RECOMMENDED BY: _____

MAIL TO: MGWA, C/O MICHELLE WEEKS, 29 COUNTY ROAD, OAKLAND, ME 04963

OR E-MAIL TO INFO@MAINEGROUNDWATER.ORG