Print Form

Membership Form

Submit form and payment to:
KAGC
P.O. Box 4558
Frankfort, KY 40601

Kentucky Association of Government Communicators

Name: _____

Place of Employment: _____

Business Address: _____

_____

Title: _____

Business Phone: _____

Email Address: _____

Membership Type: __ Active __ Organization/Agency
__ Student (list school*: _____)

Membership Status: __ Renew __ New

Amount Due: _____ Method of Payment: __ Check __ PayPal

If Organization/Agency Membership, please list the individuals:

1. _____
2. _____
3. _____
4. _____
5. _____

Membership Categories and Fees:

Active - $50 per year; $25 for students

A person currently or formerly employed by federal, state or local government in a position whose principle duty is in creating or disseminating information or illustrative materials in any medium to communicate with the agency's internal or external publics or who directs or manages these activities. This category of membership includes those who are retired, unemployed or students. Membership cannot be transferred to another individual.

Organization/Agency - $200 per year

Any group of individuals (up to five people in total) who meet the active category requirements. Members must be identified at time of application. Membership is transferable within the organization/agency when designated members leave the agency or take an extended leave of absence.

_____

* *Note: Student status may be verified; full-time state employees are not eligible for student rate.*

1-2015