



Mississippi Association of Child Care Agencies (MACCA) Join / Renewal Form

Please indicate your agency's annual budget below:

Annual Operating Budget

- Up to \$500,000
- \$500,001 to \$1,900,000
- \$1,000,001 to \$2,000,000
- \$2,000,001 to \$4,000,000
- \$4,000,001 to \$6,000,000
- \$6,000,001 to \$8,000,000
- \$8,000,001 to \$10,000,000
- Above \$15,000,000

Annual Dues

- \$500.00
- \$1,000.00
- \$2,000.00
- \$2,500.00
- \$3,000.00
- \$4,000.00
- \$6,000.00
- \$7,500.00

Each agency is to designate two members to serve on the MACCA Board – one voting member and one at large. Please identify both members below and indicate which is the voting member.

AGENCY _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____
TELEPHONE _____

NAME OF VOTING MEMBER _____
E-MAIL _____
NAME OF VOTING MEMBER _____
E-MAIL _____

- OUR AGENCY HAS CHOSEN TO PAY OUR ANNUAL DUES IN FULL AT THIS TIME
AMOUNT INCLUDED \$ _____ CHECK # _____
- OUR AGENCY WISHES TO PAY 1/2 OF OUR DUES NOW AND 1/2 IN JUNE AMOUNT
INCLUDED \$ _____ CHECK # _____