



****Invoice****
Annual Municipal Membership

Each membership entitles **ONE MEMBER** to attend all WCHA Business Meetings

\$50.00 Per Municipal Member

Name _____

Town _____ Title _____

Address _____

City _____ State _____ Zip _____

Phone _____

E-Mail (**Print Clearly**) _____

**PLEASE NOTE THAT ALL INFORMATION THAT YOU PROVIDE IS LISTED
ON OUR WEBSITE FOR OTHERS TO MAKE CONTACT WITH YOU.
PLEASE INFORM US IF YOU DO NOT WANT YOUR INFORMATION LISTED**

**All WCHA Association correspondence including notices
and meeting information is sent via email ONLY.
Thank you for printing your email clearly above!**

Please return this **INVOICE** and make check payable to:
Worcester County Highway Association
P.O. Box 446
Clinton, MA 01510

Thank you for your Membership

**info@worcestercountyhighway.com
www.worcestercountyhighway.com**