



AFFILIATE MEMBER INFORMATION

To be included in the SACRS online membership listing, this form, with payment **MUST BE RETURNED BY July 31**. If you have any questions, please contact SACRS at (916) 701-5158.

COMPANY LISTING: This is the only listing for your company; please print information as you want it to appear in the online roster. In addition to your company listing, your two affiliate members and their titles will be listed in the online roster, as well as their pictures.

ONLINE PHOTO ROSTER: We also ask that your company upload/submit an electronic photograph of each listed representative in a jpg, gif or bmp format. All photographs must be uploaded/received by July 31 to be included in the online roster. Our preferred method is by email, sacrs@sacrs.org.

Company Information

Name of Company:

Address:

City:

State:

Zip Code:

Telephone:

Fax:

Website Address:

NOTE: In 15 words or less, describe your company. (Descriptions over 15 words will be modified.)

Affiliate Member (The following information is for all SACRS correspondence.)

Name/Title:

Address:

City:

State:

Zip Code:

Telephone:

Fax:

Email:

Please complete second page!

Affiliate Member (Continued)

Name/Title:

Address:

City:

State:

Zip Code:

Telephone:

Fax:

Email:

Completed by:

Name:

Telephone:

Email: