



Maine Cemetery Association

APPLICATION FOR MEMBERSHIP

NAME: Town of Limerick Cemetery Committee

HOME ADDRESS: 55 Washington St

CITY: Limerick STATE: ME ZIP CODE: 04048

PHONE #: 793-2116 FAX #: _____

CEMETERY OR COMPANY NAME: Town of Limerick Cemetery Committee

ADDRESS: 55 Washington St

CITY: Limerick STATE: ME ZIP CODE: 04048

PHONE #: 793-2116 FAX #: _____

CEMETERY CATEGORY (CHECK ONE)

PRIVATE _____ MUNICIPAL RELIGIOUS _____ OTHER _____

(FOR NON-CEMETERIANS) BRIEFLY DESCRIBE YOUR COMPANY'S PRODUCTS AND OR SERVICES.

CLASS OF MEMBERSHIP APPLIED FOR: (SEE BELOW)

REGULAR MEMBER ASSOCIATE MEMBER _____

NAME OF REGULAR MEMBER WHO IS SPONSORING YOU.

Hugh LeMaster

PLEASE ENCLOSE FIRST YEARS DUES (\$25.00) AND MAIL TO:

Stephen Burrill, MCA SECRETARY/TREAS.
C/O Mt. Hope Cemetery
1048 State Street
Bangor, ME 04401

The Association shall consist of three (3) classes of members. These shall be Regular Members, Associate Members and Honorary Members. Regular Members shall be those who are actively engaged in the management or supervision of a Maine Cemetery. They shall have the right to vote, be eligible to hold office, and pay Association dues. Applicants for this class of membership must have a minimum of six (6) Month's experience and must be sponsored by a Regular Member. Associate Members shall be those who are engaged in an allied industry or profession. They shall pay Associate dues, but shall have no vote nor eligible to hold office. Applicants for this class of membership must also be sponsored by a Regular Member. Applicants for Regular or Associate Membership must be approved by the membership committee. Honorary Members may be elected on recommendation of the Membership Committee and shall be persons whom the Membership Committee deem worthy of the distinction. Honorary Members shall have no vote and shall not be subject to dues.

Print Form

M.O.C.A. MEMBERSHIP

Make check payable to: Maine Old Cemetery Association

Membership Status: New Renewal (please check one)

One Year - \$5.00 Five Years - \$20.00 Lifetime Membership - \$100.00

Name Town of Limerick Cemetery Committee

Address 55 Washington St

City/Town Limerick State ME Zip+4 04049

Telephone 703-2146 e-mail _____

Mail to Membership Chairperson
c/o M.O.C.A., P.O. Box 641, Augusta, ME 04332-0641