



**Registration Form for
ACTIVE Membership 2019
Wisconsin Government Finance Officers Association
www.WGFOA.com**

Contact Information:

Name: _____ Certifications: _____

(CPFO, CPA, etc.)

Employer: _____ Title: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Work Phone: _____ Work Email: _____

Home Phone: _____ Home Email: _____

WGFOA Membership Information:

- Renewal** **New**

Membership Type:	Annual Dues:
Active Membership is for all public officials or employees of a governmental entity or State College within the State of Wisconsin.	<input type="checkbox"/> \$ 25.00 for 12 months (January 1 to December 31, 2019)

Payment Information:

Check Check Number: _____ Check Amount: _____

Make check payable To: UW-Green Bay

Mail to: Send registration form with payment to:

**UW-Green Bay - Govt
2420 Nicolet Drive, CL109
Green Bay, WI 54311-7001**