

**UTAH MUNICIPAL CLERKS ASSOCIATION  
MEMBERSHIP DUES SCHOLARSHIP APPLICATION**

***FULL COST OF ONE MEMBERSHIP***

Name of Municipality \_\_\_\_\_

Name of Recorder/Clerk/Deputy \_\_\_\_\_

Address: \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Population \_\_\_\_\_

Email: \_\_\_\_\_

I am requesting  Membership scholarship

(Initial & Complete)

\_\_\_\_\_ I am a duly appointed:  Recorder  Clerk  Deputy

\_\_\_\_\_ I am or have been an active member of UMCA.

\_\_\_\_\_ My City/Town  is a member  has never been a member

\_\_\_\_\_ I am currently working on my  CMC  MMC

\_\_\_\_\_ My city/town is unwilling or unable to fund the membership dues.

\_\_\_\_\_ My city/town has cut membership fees  Yes  No

**PLEASE** explain in detail why you would like this membership scholarship (*give reasons why it is important to be a member of UMCA*). Please attach a separate sheet if necessary.

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Signature of City Recorder/Clerk/Deputy \_\_\_\_\_ Date \_\_\_\_\_

Please mail to:  
Kate Black  
Town Clerk/UMCA Treasurer  
P.O. Box 8016  
Alta, Utah 84092-8016