



Conference for Catholic Facility Management

MEMBERSHIP DUES APPLICATION

Regular Member

CCFM DUES YEAR IS FROM JULY 2004 - JUNE 2005

Arch/Diocese: _____

Representative's Name(s): _____

Address: _____

Telephone No. _____ E-mail _____

Number of Catholics: _____

<i>Membership Class</i>	<i>Size Arch/Diocese</i>	<i>No. of Catholics</i>	<i>Annual Amount</i>
Regular Members	Small	100,000 or less	\$200
	Medium	100,001-350,000	\$300
	Large	350,001 or more	\$400

Fee: _____

Please make checks payable to:

Conference for Catholic Facility Management
P.O. Box 177
Bowie, MD 20719-0177