

**2019**

**Association of Clerks of Circuit Courts of Indiana  
Membership Registration Form**

A membership card will be sent to each person as indicated below  
PLEASE TYPE OR PRINT EACH NAME CLEARLY . . . THANK YOU

County \_\_\_\_\_ Clerk \_\_\_\_\_  
Maximum \$450.00 or 1% of Salary \$ \_\_\_\_\_

Deputy _____	Email _____
Deputy _____	Email _____
Deputy _____	Email _____
Deputy _____	Email _____
Deputy _____	Email _____
Deputy _____	Email _____
Deputy _____	Email _____
Deputy _____	Email _____
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Deputy _____	Email _____
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Deputy _____	Email _____
Deputy _____	Email _____
Deputy _____	Email _____
Deputy _____	Email _____
Deputy _____	Email _____

Please note: Only the clerk and deputies that have paid membership dues will receive a Clerk's Directory

Number of Deputy Clerks \_\_\_\_\_ x \$15.00 = Total \$ \_\_\_\_\_

Voluntary dues of \$100.00 for Association legal or legislative expenses, as set forth  
in our by-laws \$ \_\_\_\_\_

Grand Total \$ \_\_\_\_\_

PLEASE COMPLETE THIS MEMBERSHIP FORM AND RETURN THIS FORM WITH  
YOUR CHECK PAYABLE TO: INDIANA CLERK'S ASSOCIATION

**Distribute Payments to ACCCIND Treasurer:**

MARION COUNTY CLERK  
MYLA A ELDRIDGE  
200 E WASHINGTON ST W-122  
INDIANAPOLIS, IN 46204