



**PUBLIC RISK MANAGEMENT ASSOCIATION - CT CHAPTER**  
**2016 Membership Registration**

**CT PRIMA** is the Connecticut Chapter of National PRIMA, a non-profit corporation. **CT PRIMA** was formed in the 1980's to serve all governmental entities in Connecticut. Our membership currently includes local governments, school districts, fully retired Municipal Risk Managers, public entities and business associations that provide risk management services.

**CT PRIMA** conducts seminars and other educational affairs to strengthen the risk management of public entities. We encourage and conduct research into risk management topics and encourage and provide opportunities for the exchange of information among governmental entities. We also cooperate with and encourage relationships with business associations engaged in insurance and risk management, especially with respect to education and training.

**ASSOCIATION DUES:**

- *Regular Members* (Government Entities, School Districts, Housing Authorities) - **\$35.00 per person**  
 Additional members from same organization \$25.00 per person
- *Enhanced Members* – Includes annual dues and all meetings (same as above requirements) - **\$175 per person**
- *Associate Members* (All Others) - **\$65.00 per person**  
 Additional members from same organization \$55.00 per person
- *Fully Retired Municipal Risk Managers*– **Free Dues** (payment for individual seminars only)

**MEMBER INFORMATION:**

|                                                                                                                                                                     |        |         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|---------|
| Name:                                                                                                                                                               | Title: |         |
| Agency/Company/Municipality Name:                                                                                                                                   |        |         |
| Type of Government/Company:                                                                                                                                         |        |         |
| Address:<br><div style="border-bottom: 1px solid black; height: 15px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px;"></div> |        |         |
| Phone:                                                                                                                                                              | Fax:   | E-Mail: |

- [ ] I wish to renew my current membership to CT PRIMA or join as a new member. I have provided my contact information in the section above and have enclosed my dues payment.
- [ ] I do not wish to join CT PRIMA at this time, however, would like to be placed on your mailing list to receive Chapter news, including meeting notices. I have provided my contact information in the section above.

**PLEASE RETURN THIS FORM TO:** Cyndi Tower, Risk Service Analyst  
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 Hartford, CT. 06103  
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 Email: CTower@themdc.com