**PROCEDURE FOR A MEMBER TO NAME AN ASSOCIATE MEMBER(S)**

* The Member dues must be paid for the current year.
* Associate Members must be 18 years of age or older.

**ENCLOSED PLEASE FIND THE FOLLOWING FORMS:**

* ASSOCIATE MEMBERSHIP FORM (**AM-1**) to be filled out by the Member.
* APPLICATION FOR ASSOCIATE MEMBERSHIP FORM (**AM-2**) to be filled out by the Member’s children, step children, sibling or grandchild applying for Associate Membership.
* APPLICANT QUESTIONNARIE (**AM-3**) to be filled out by the Member’s children, step children, sibling or grandchild applying for Associate Membership.

**ALONG WITH THE COMPLETED FORMS PLEASE SEND THE FOLLOWING:**

* Copy of Associate Member’s State Certified Birth Certificate.
* Copy of Associate Member’s current Driver’s License.

**RETURN FORMS TO: KAREN BLOCK, Secretary/Treasurer**

**2414 BYRUM BLVD.**

**JOLIET, IL 60431-1004**

**(815)-530-1817 - ksblock@comcast.net**

After receiving all of the required documents, you will be notified the date, time and place of the bylaws review meeting. Both the Member and the Associate Member must attend the bylaw review meeting.

**At the time of the meeting you will need to have a check in the amount of $725.00**.

This amount is the initiation fee of $500.00 which is non-refundable and $225.00 for the current dues. Make checks payable to **CECO EMPLOYEES RECREATION ASSN., INC.**