

CONPOR MEMBERSHIP APPLICATION

Conference of Private Organization of Maryland

Individual Dues
\$10/person

Lodge/Post Dues
\$50/year

Associate Membership
\$100/year

(circle one)

Name: _____

Association and Lodge Post: _____

Address for your CONPOR mailings:

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

E-Mail: _____

Is this your: Home Address Lodge/Post Address

Please make check payable to CONPOR of MD and mail to:

CONPOR of MD
12 Francis Street
Post Office Box 511
Annapolis, MD 21404

**TAKE THE CONPOR SURVEY AND LET US KNOW WHAT
CONCERNS YOU THE MOST IN 2005-06**

Please check those issues which are your top priorities for change or protection

- | | |
|---|---|
| <input type="checkbox"/> Right to privacy | <input type="checkbox"/> liquor license & membership requirements |
| <input type="checkbox"/> Smoking prohibitions | <input type="checkbox"/> elimination of tax exempt status |
| <input type="checkbox"/> Charitable gaming | <input type="checkbox"/> increased chances & liability for being sued |

