



**MINNESOTA STREET  
SUPERINTENDENTS ASSOCIATION**

**2025 NEW/RENEWAL APPLICATION**  
**ASSOCIATE MEMBERSHIP**

<http://mssamn.com>

**Fee: \$250.00 for the first Associate Member Application**  
**\$75.00 for each additional Associate Member Application**

**NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**PHONE** \_\_\_\_\_ **CELL PHONE** \_\_\_\_\_

**E-MAIL** \_\_\_\_\_

*PLEASE INCLUDE TO ENSURE RECEIPT OF ELECTRONIC ANNOUNCEMENTS IN A TIMELY MANNER*

**EMPLOYER** \_\_\_\_\_

**YOUR POSITION** \_\_\_\_\_

Return with check made payable to "MSSA" to:

MSSA  
Attn: Kalea Fischer, PW Maintenance  
1700 W 98th St  
Bloomington, MN 55431

Associate Application (First Member) \$250.00

Additional Associate Applications (Each Member) \$75.00

**(Each additional Associate Member needs to complete a membership registration form)**

Total Number of Associate Members from your agency \_\_\_\_\_

**TOTAL AMOUNT ENCLOSED** \_\_\_\_\_