



Minnesota Association of County Administrators

December 18, 2009

Dear MACA Members:

**Attached is the application form for your 2010 membership in the Minnesota Association of County Administrators (MACA). Some counties have expressed an interest in paying their 2010 MACA dues out of 2009 funding which is why you are receiving this invoice before the first of the year.** We look forward to the renewed membership of all our current members and welcome those of you who are new to the organization.

Also enclosed is eligibility and membership information for MACA and for the Minnesota City/County Management Association (MCMA). MACA and MCMA have a joint membership arrangement that allows MACA members to make one membership payment for both organizations. MCMA membership is optional, but if you wish to belong to both organizations you can make one payment and we will remit the MCMA share of the dues to them along with your application.

**You will also note that the annual dues for MACA are the same as last year.** The Board hopes that MACA membership will continue to be a priority for you and your county. The professional support, information sharing, technical assistance and collegiality gained through membership in MACA is always valuable, but especially so in these challenging times.

The MACA Board values your membership and asks that you give this application your prompt attention.

Thank you.

Sincerely,

A handwritten signature in black ink that reads "Trish Klein". The signature is written in a cursive, flowing style.

Trish Klein  
MACA President

*"In the middle of every difficulty lies opportunity."*  
-Albert Einstein



**President**  
Trish Klein  
(Roseau)

**Vice President**  
Molly O'Rourke  
(Washington)

**Secretary**  
Mary Callier  
(Olmsted)

**Treasurer**  
Riaz Aziz  
(Pope)

**Past President**  
Montgomery Headley  
(Benton)

**At-Large Board Members**  
Brian Bensen (Sherburne)  
Sharon Hanson (Pipestone)  
Tim Houle (Morrison)

## Membership Application: January - December 2010

Name: \_\_\_\_\_ Title: \_\_\_\_\_

County: \_\_\_\_\_ Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

**MACA MEMBERSHIP DUES:** (a portion of the dues pays for membership in the National Association of County Administrators)

- |   |   |
|---|---|
| <input type="checkbox"/> \$185/year (0-30,000 population)         | <input type="checkbox"/> \$310/year (150,000+ population) |
| <input type="checkbox"/> \$210/year (30,000 - 75,000 population)  | <input type="checkbox"/> Associate Dues: \$185/year       |
| <input type="checkbox"/> \$260/year (75,000 - 150,000 population) | <input type="checkbox"/> Emeritus Dues: \$50              |

**MCMA (Minnesota City/County Management Association) OPTIONAL MEMBERSHIP:**  
(for period of May 1, 2009-April 30, 2010) PLEASE SEE APPLICATION ON PAGE 3.

- City or County Manager or Administrator** \$80 or .001 x annual salary if salary is over \$80,000

PLEASE USE APPLICATION ON PAGE 3 FOR MCMA OPTIONAL MEMBERSHIP.

**Experience:** In Local Government Administration: \_\_\_\_\_ years  
 In County Government Administration: \_\_\_\_\_ years  
 In present position: \_\_\_\_\_ years  
 Does your position appoint dept. heads? \_\_\_\_\_  
 Do you supervise dept. heads? \_\_\_\_\_  
 Do you prepare the county budget? \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Please mail application, with your check, to: Minnesota Association of County Administrators  
Attn: Susan Bowman  
125 Charles Avenue  
Saint Paul, MN 55103-2108

Please see reverse side for membership information related to both organizations.

## **MACA Statement of Eligibility**

(According to Article II, MEMBERSHIP, of the Bylaws of the Minnesota Association of County Administrators)

### **ARTICLE II: MEMBERSHIP**

**Section 1. Members** - The Chief Administrative Officer of a county, regardless of the title used, who is appointed by and responsible to the Board of County Commissioners as its agent, shall be eligible for membership. **Section 2. Associate Members** - Each member may designate members of their management staff as associate members. **Section 3. Other Participants** - **A.** Other staff assistants to members may participate in the Association with the consent of the member. **B.** Members and associate members in transition among public sector positions shall be eligible for membership. There shall be no dues for the first twelve months of transition; thereafter it shall be \$50 annually. **Section 4. Voting Rights** - Each member and each associate member shall have one vote. **Section 5. Emeritus Membership** - **A.** Former county administrators, retiring from any active employment, shall be eligible for emeritus membership. Emeritus membership is granted upon a one time dues payment of \$50. **B.** Former county administrators who leave county employment and enter the private sector are eligible for emeritus membership unless their private sector clients include county government. Dues for said membership shall be \$50 annually. **Section 6. Honorary Membership** - Honorary membership may be bestowed upon any worthy person proposed by a MACA member at an annual meeting upon the majority vote of the membership present.

## **MCMA Membership Eligibility (Please see application on page 3)**

(According to Article 7, MEMBERSHIP, of the Constitution of the MN City/County Management Association)

### **ARTICLE VII: MEMBERSHIP**

**Section 1.** The corporate members of this Association shall be designated as members and associate members. All other classes of membership shall be designated noncorporate and shall be known as cooperating and honorary members. The privilege of voting is limited to corporate members.

**Section 2. MEMBER:** A member shall meet one of the following qualifications:

- A)** Any person who is the administrative head of a local government recognized by this Association or ICMA as operating under the council-manager plan, and whose professional conduct conforms to the code of ethics of the ICMA shall be eligible to this membership.
- B)** Any person who is the administrator of a local government recognized by this Association or ICMA as operating under a general management classification and whose professional conduct conforms to the code of ethics of ICMA shall be eligible to this membership.
- C)** Any person who is the administrative head of a legally constituted council of government or state association of local governments recognized by this Association or ICMA and whose professional conduct conforms to the code of ethics of ICMA shall be eligible to this membership.

It shall be the duty of the President to invite any newly appointed person to apply for said membership. The Executive Board shall approve the membership of all persons newly appointed to recognized positions. Upon request of the Executive Board the Recognition and Membership Committee shall review and recommend action on the application of any members.

**Section 3. ASSOCIATE MEMBERS:** An associate member shall be one who meets the following qualifications:

- A)** Any person who is an Assistant City Manager, Assistant Director of a council government, Administrative Assistant, or an Assistant Administrator, or some similarly titled position who has significant general administrative responsibility in a municipality recognized by the Association and who is appointed by the Manager or Chief Administrator.
- B)** Application for membership shall be signed by the appointing Manager, Director of Council of Governments, or Administrator who is a member of this organization. The application shall be countersigned by a member or an associate member.

**MINNESOTA CITY/COUNTY MANAGEMENT ASSOCIATION  
MEMBERSHIP FORM  
FOR MEMBERSHIP YEAR MAY 1, 2010 – APRIL 30, 2011**

**WORK INFORMATION** (Please print or you may attach your business card.)

NAME \_\_\_\_\_ TITLE \_\_\_\_\_

CITY or COUNTY or ORGANIZATION \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY / STATE / ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

**Please keep us up-to-date on any changes to this information. Thank you.**

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**HOME INFORMATION** (We will use this information only if you are in transition. Please keep us up-to-date of any changes.)

HOME MAILING ADDRESS

\_\_\_\_\_

HOME PHONE \_\_\_\_\_ HOME EMAIL \_\_\_\_\_

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**MEMBERSHIP CATEGORY**

(Please See "MCMA Membership Categories and Qualifications" on the MCMA Website)

	<b>ANNUAL DUES</b>	
___ Full or Associate	\$80 or .001 x annual salary if salary exceeds \$80,000	
___ Affiliate	\$80	
___ Student	\$22	
___ Life	\$0	
___ Honorary	\$0	
___ In Transition	\$0	<b>Amount Enclosed \$</b> _____

**Please Circle -- RENEWAL or NEW membership**

Existing members of MCMA will receive notice of applications for **NEW** Full memberships with a 60 day opportunity to comment.

**In signing this application or renewal, I hereby certify that I meet the criteria form for the membership category for which I am applying. Full, Corporate members also agree to abide by the ICMA/MCMA Code of Ethics.**

\_\_\_\_\_  
Signature

Please enclose a check for dues payable to **Minnesota City/County Management Association** and mail it with the application to **MCMA Secretariat, League of Minnesota Cities, 145 University Avenue West, St. Paul MN 55103-2044**. Please direct your questions to Kevin Frazell at 651-281-1215 or [kfrazell@lmc.org](mailto:kfrazell@lmc.org).