



# Corrections USA

## *ORGANIZATIONAL MEMBERSHIP APPLICATION*

Organization: \_\_\_\_\_

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

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Contact Person Email: \_\_\_\_\_

Contact Person Phone Number: \_\_\_\_\_ FAX: \_\_\_\_\_

Organizational membership dues are \$1.00 per member per year for all organizations.

\$1.00 x \_\_\_\_\_ (# of Members) = \$ \_\_\_\_\_

We support the goals and objectives of Corrections USA and have a zero tolerance policy for prison privatization.

*Signed:* \_\_\_\_\_ *Date:* \_\_\_\_\_

*Please make checks payable to Corrections USA and mail them to:*

*Corrections USA  
11400 Atwood Road  
Auburn, Ca. 95605-7835*