ABOUT PSATS

Since its creation in 1921, PSATS has watched municipal government grow and change tremendously, and the Association has expanded its services to keep pace.

Today’s municipal leader faces a full plate of responsibilities, and fortunately, the Pennsylvania State Association of Township Supervisors is here to help with this ever-growing challenge. PSATS provides a wide array of services, from information and training to insurance and advocacy, to help municipalities serve their citizens well.

PSATS represents the 1,454 townships of the second class in the commonwealth.
As the premier local government association in the commonwealth, the Pennsylvania State Association of Township Supervisors has a solid reputation for providing top-notch services to its members, including information, training, and insurance programs.

Now you can become a part of PSATS as an associate member and enjoy the benefits of some of these services at the reduced member rate.

(Note: Townships of the second class are not eligible for associate membership.)

**BENEFITS OF ASSOCIATE MEMBERSHIP**

**MUNICIPALITIES/OTHERS WITH AN INTEREST IN PA. LOCAL GOVERNMENT**

- Member rate for all training workshops offered through PSATS, plus the Association's Annual Educational Conference.
- A free one-year subscription to the *Pa. Township News*, the association's award-winning monthly magazine, and the member subscription rate of $36 a year for additional copies.
- Eligibility to participate in PSATS' Drug and Alcohol Testing Program* — Through this program, PSATS helps municipalities and others comply with federal drug and alcohol testing laws, particularly those governing employees who operate vehicles requiring commercial driver's licenses. The program provides all required drug and alcohol testing at many convenient sites, training, and consultation with knowledgeable staff. It also provides testing for employees in other safety-sensitive positions, as well as pre-employment testing.

**BUSINESS PARTNERS**

- One free subscription to the *Pa. Township News* magazine if an advertiser in the Association's award-winning monthly magazine and the member subscription rate of $36 a year for additional copies.
- A listing in the Local Government Marketplace on the PSATS website. Visitors to our website can search the marketplace for leads alphabetically by vendor name or by geographic region or product/service of interest. *(Note: PSATS will provide you with the link to the marketplace form upon membership.)*
- Use of the PSATS logo in advertisements in the *Pa. Township News* and PSATS Conference program book. Vendors may use the logo and the words "Associate Member" in their ads. *(Note: PSATS will provide you with a PDF of the logo upon membership.)*
- Member rate for all training workshops offered through PSATS.

**ANNUAL MEMBERSHIP FEE**

- $200 per year for business partners and municipalities of 10,000 population and under
- $500 per year for municipalities over 10,000 population

**SIGN UP TODAY!**

To become an associate member of PSATS and start reaping the benefits of membership, simply fill out the application form and submit it to PSATS with payment.

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*At additional cost.*

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**PSATS ASSOCIATE MEMBERSHIP APPLICATION**

To join PSATS as an associate member, please complete this form and send with a check or credit card information to:

**PSATS - 4855 Woodland Drive • Enola, PA 17025**
Phone (717) 763-0930 • Fax: (717) 763-9732

Additional membership applications can be downloaded at [psats.org](http://psats.org). Click on “Programs and Services” and choose “Associate Membership.” Scroll down to access the link to the membership form.

**Check One**

- Municipality (other than a township of the second class)
  - 10,000 population and under – $200
  - Over 10,000 population – $500
- Business Partner – $200
- Other – $200 (Please describe, such as an individual or other type of organization that doesn’t fit the two categories above.) ____________________________

**Name __________________________________________**

**Title/Position __________________________________**

**Municipality (if applicable) _______________________**

**County ________________________________________**

**Population _____________________________________**

**Company (if applicable) __________________________**

**Address _________________________________________**

**City ___________________________________________**

**State _________________________ Zip _____________**

**Daytime Phone ( _________ ) ______________________**

**Cell ( _________ ) ______________________________**

**Fax ( _________ ) ______________________________**

**Email _________________________________________**

*(Please complete the other side, too.)*