



2019

CRA Membership Renewal

COMPANY INFORMATION

Company Name _____

Contact Name _____ Phone _____

- Has your address changed?
- Has the CRA contact name or email for your company changed?
- Have you acquired additional certifications &/or made changes to your company's services?

____ I have reviewed my member profile at www.crassociation.org and do not wish to make any changes.

____ I would like to make the following changes to my CRA Member Profile:

PAYMENT INFORMATION

Use the credit card already on file. (Please print & sign name to authorize renewal fee of **\$360.00** to be charged)

Cardholder Name _____ Signature _____

Card Billing Address _____

OR use a different method of payment:

Credit: Visa / MasterCard / American Express

Credit Card # _____ **Exp.** _____ **Code** _____

(M/C, Visa 3 digits on back, AMEX 4 digits on front of card)

Cardholder Name: _____ **Billing Zip Code:** _____

Check in the amount of \$360.00

(Payable to the CRA. Please mail your check payment along with this form to CRA, 3284 Ramos Circle, Sacramento, CA 95827)

Please mail my 2019 CRA Membership Certificate along with my receipt to:

the address on file **OR** Name/Company: _____

Street Address: _____

City/State/Zip: _____

Thank you for renewing your membership with the CRA!