2025/2026 Vermont Assessors and Listers Association

Membership Coordinator: Mimi Burstein, PO Box 373, Randolph, VT 05060 vtassessorsandlisters@gmail.com

MEMBERSHIP APPLICATION

Membership runs from July 1st through June 31st

Name:		_Title:		
Town/Firm Name:				
Town/Firm Address:				
Town/Firm Telephone:		Preferred Telephone:		
Email for Correspondence:				
County:				
Type of Membership: (Please c	heck one)			
MUNICIPALITY MEMBER (\$50.00 per Municipality 1		# of Municipalities*: ct with multiple Municipalities)	
BUSINESS/INDIVIDUAL (\$3 0).00 per individual) #	of Individuals:		
Total Due: Make	check payable to: VA	LA Membership PO Box 37	3, Randolph, VT 05060	
	• •	ment, and we will email you mes or municipalities below		
Please use the space below to lis	t the names of memb	pers or the municipalities inc	cluded in the membership.	
ember Names or Municipality	Designation	Work Email	Work Phone	