****

CALIFORNIA ASSOCIATION OF

SUPERIOR COURT INVESTIGATORS (CASCI)

Membership Dues Statement

**CASCI Membership Benefits:**

* **Statewide and Regional CASCI conferences at discounted rates;**
* **Access to the CASCI Listserve - an email forum with other CASCI members;**
* **Access to the Statewide CASCI Directory.**

***The CASCI Listserve is for the benefit of CASCI members in good standing. Once memberships dues have been paid, you will be added to the Listserve. CASCI Membership Dues are good for the calendar year in which they are paid.***

***(January 1 through December 31)***

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| *Name:* | | |  | | |  | *Title:* | |  |
|  | | |  | | |  |  | |  |
| *County:* | | |  | |  | |  | |  |
|  | | |  | | |  |  | |  |
| *Office address:* | | | |  | | | | | |
|  | | |  | |  | |  | |  |
| *Phone:* | |  | | |  | | *Fax:* |  | |
|  | | |  | |  | |  | |  |
| *Email:* |  | | | | | | | |  |

**Please make your Check/Money Order out to “CASCI” for $50.00 per investigator   
and mail to:**

Linda Trias, CASCI Treasurer

1891 Olmo Way

Walnut Creek, CA 94598

* Please mark the envelope **“CONFIDENTIAL”**
* If you email this form, please indicate the date your check will be sent.
* You will not be listed as a member until the payment is received.

****

**Additional CASCI members:**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| *Name:* | | |  | | |  | *Title:* | |  |
|  | | | | | | | | | |
| *Office address (if different):* | | | |  | | | | | |
|  | | | | | | | | | |
| *Phone:* | |  | | |  | |  |  | |
|  | | | | | | | | | |
| *Email:* |  | | | | | | | |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| *Name:* | | |  | | |  | *Title:* | |  |
|  | | | | | | | | | |
| *Office address (if different):* | | | |  | | | | | |
|  | | | | | | | | | |
| *Phone:* | |  | | |  | |  |  | |
|  | | | | | | | | | |
| *Email:* |  | | | | | | | |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| *Name:* | | |  | | |  | *Title:* | |  |
|  | | | | | | | | | |
| *Office address (if different):* | | | |  | | | | | |
|  | | | | | | | | | |
| *Phone:* | |  | | |  | |  |  | |
|  | | | | | | | | | |
| *Email:* |  | | | | | | | |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| *Name:* | | |  | | |  | *Title:* | |  |
|  | | | | | | | | | |
| *Office address (if different):* | | | |  | | | | | |
|  | | | | | | | | | |
| *Phone:* | |  | | |  | |  |  | |
|  | | | | | | | | | |
| *Email:* |  | | | | | | | |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| *Name:* | | |  | | |  | *Title:* | |  |
|  | | | | | | | | | |
| *Office address (if different):* | | | |  | | | | | |
|  | | | | | | | | | |
| *Phone:* | |  | | |  | |  |  | |
|  | | | | | | | | | |
| *Email:* |  | | | | | | | |  |