

# Arkansas Association for Court Management

## Membership Application

January 1, 2024 – December 31, 2024

\_\_\_\_\_ **General Membership** is for persons who are certified by the National Center for State Courts' Institute for Court Management as a Certified Court Manager, Certified Court Executive, an ICM Fellow, or certified ICM faculty members. A general member may vote, be an officer, and serve or chair committees. **\$35.00 Annual Fee** for General Membership.

\_\_\_\_\_ **Associate Membership** is for persons who employed in the field of court administration. An Associate Member may participate in the Association's activities but may not vote, chair a committee, nor hold office. **\$25.00 Annual Fee** for Associate Membership.

\_\_\_\_\_ **Emeritus Membership** is for former General Members who have since retired or resigned from court management. There are no dues, they may not vote, nor hold office.

\*Name \_\_\_\_\_

\*Title \_\_\_\_\_

\*Court \_\_\_\_\_

\*Primary Work Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_

State \_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

Secondary Address \_\_\_\_\_

\*Primary Email \_\_\_\_\_

Secondary Email \_\_\_\_\_

Certification Status	
<i>(check all that apply)</i>	
<input type="checkbox"/> No Certification	
Cert. Level	Cert. Year
<input type="checkbox"/> CCM	
<input type="checkbox"/> CCE	
<input type="checkbox"/> ICM Fellows	
<input type="checkbox"/> ICM Faculty	

Dual Membership (\$5 discount)
<input type="checkbox"/> I am a current NACM Member (attach NACM dues receipt)
<input type="checkbox"/> I intend to join NACM

**Are you interested in serving on any of our committees?** (Check all that apply)

- By-Laws                       Membership
- Professional Development (Education)
- Maybe, I'd like more information about committees first.

Please return this form along with your payment made payable to the "Arkansas Association of Court Management" to:

**Arkansas Association of Court Management**  
**Sharon Blount-Baker, Treasurer**  
**P.O. Box 608**  
**Van Buren, AR 72957**

OFFICE USE	
Check Number	
Check Amount	
<input type="checkbox"/> Public Funds	<input type="checkbox"/> Private Funds
Received Date	
Board Approval Date	
Member Roll Entry Date	

*Thank you for your participation & support!*