



Kansas Association of Code Enforcement
 An ICC Preferred Provider
Organization Member Application 2017



KACE Memberships are Organization based Governmental Organizations (cities & counties) must have at least one designated individual member enrolled on the back of the application. Affiliate Agencies and Affiliate Companies must be member organizations in order to exhibit at the semi-annual training conferences, however, individuals from Affiliate Agencies and Affiliate Companies may join as individuals without the organization being a member by filling out the "Supervisor or Manager" section below.

Application Date: _____

Organization Name: _____ Primary Dept.: _____

(Please check one) **New Member:** _____ **Renewing Member:** _____

Organization Street Address: _____

City: _____ State: ____ Zip: _____

Supervisor or Manager's Name: _____

Title _____ E-mail: _____

Office Phone: _____ Fax: _____

Check Your Organization Membership Category for 2017:

Governmental Organization: \$20, ____ **Affiliate Agency:** \$20, ____ **Company:** \$ 100, ____ \$ _____

Individual Membership Fees Due (from back): \$ _____

For Late Renewal Application submitted after March 15, 2017 add \$10: \$ _____

For Late Renewal Payment submitted after March 15, 2017 add \$15: \$ _____

For Reinstatement Fee if Renewal submitted after March 30, 2017 add \$30: \$ _____

Memberships not renewed by March 30, 2017 may be terminated and the individual certification credit record will be cleared of training credits earned. A new application and additional reinstatement fees may be required to restore certification credit.

Total Due: \$ _____

(Add your membership fee and any late or reinstatement fee, if a renewal, and enter total in 'Total Due')

Signature: _____

Supervisor Date

NOTE: PLEASE BE SURE YOUR ACCOUNTING DEPARTMENT HAS THE NEW "PAYMENT" ADDRESS BELOW TO ENSURE THAT KACE RECEIVES YOUR MEMBERSHIP DUES!

Please e-mail Application to: info@kace-ks.org or fax to 816-618-3253 or mail to address below.

Please mail Payment to: KACE, c/o Skip Moon, Exec. Mgr., 20922 W. Cedar Ridge Rd., Cleveland, MO 64734

(Enter the appropriate fee to the right of each employees name)

	Certified \$30	Profess. \$40	Affiliate \$20
Employee Name: _____ Office Phone: _____ Membership Dues Category: _____ Title: _____ E-mail: _____ Fax: _____ Make your info available: Public _____ Members only _____ Not at all _____	_____	_____	_____
Employee Name: _____ Office Phone: _____ Membership Dues Category: _____ Title: _____ E-mail: _____ Fax: _____ Make your info available: Public _____ Members only _____ Not at all _____	_____	_____	_____
Employee Name: _____ Office Phone: _____ Membership Dues Category: _____ Title: _____ E-mail: _____ Fax: _____ Make your info available: Public _____ Members only _____ Not at all _____	_____	_____	_____
Employee Name: _____ Office Phone: _____ Membership Dues Category: _____ Title: _____ E-mail: _____ Fax: _____ Make your info available: Public _____ Members only _____ Not at all _____	_____	_____	_____
Employee Name: _____ Office Phone: _____ Membership Dues Category: _____ Title: _____ E-mail: _____ Fax: _____ Make your info available: Public _____ Members only _____ Not at all _____	_____	_____	_____
Employee Name: _____ Office Phone: _____ Membership Dues Category: _____ Title: _____ E-mail: _____ Fax: _____ Make your info available: Public _____ Members only _____ Not at all _____	_____	_____	_____
Employee Name: _____ Office Phone: _____ Membership Dues Category: _____ Title: _____ E-mail: _____ Fax: _____ Make your info available: Public _____ Members only _____ Not at all _____	_____	_____	_____
Employee Name: _____ Office Phone: _____ Membership Dues Category: _____ Title: _____ E-mail: _____ Fax: _____ Make your info available: Public _____ Members only _____ Not at all _____	_____	_____	_____
Employee Name: _____ Office Phone: _____ Membership Dues Category: _____ Title: _____ E-mail: _____ Fax: _____ Make your info available: Public _____ Members only _____ Not at all _____	_____	_____	_____
Employee Name: _____ Office Phone: _____ Membership Dues Category: _____ Title: _____ E-mail: _____ Fax: _____ Make your info available: Public _____ Members only _____ Not at all _____	_____	_____	_____
Employee Name: _____ Office Phone: _____ Membership Dues Category: _____ Title: _____ E-mail: _____ Fax: _____ Make your info available: Public _____ Members only _____ Not at all _____	_____	_____	_____
Employee Name: _____ Office Phone: _____ Membership Dues Category: _____ Title: _____ E-mail: _____ Fax: _____ Make your info available: Public _____ Members only _____ Not at all _____	_____	_____	_____
Employee Name: _____ Office Phone: _____ Membership Dues Category: _____ Title: _____ E-mail: _____ Fax: _____ Make your info available: Public _____ Members only _____ Not at all _____	_____	_____	_____
Employee Name: _____ Office Phone: _____ Membership Dues Category: _____ Title: _____ E-mail: _____ Fax: _____ Make your info available: Public _____ Members only _____ Not at all _____	_____	_____	_____
Total Due in each category for Individuals above	_____	_____	_____

2017 KACE Membership Application Instructions

Organizations with individual members:

1. Organizations applying for membership should fill out the top half of the form, including the Supervisor or Manager that is approving the organizations membership and individual memberships that will be entered on page 2 of the form, usually the back of the form.
2. Determine the organization's membership category and enter the appropriate membership dues in the center of the form.
3. Enter on page 2 all of the individual memberships being sponsored by the organization and the appropriate membership fee for each individual in the appropriate column on the right side of page 2.
4. At the bottom of page 2, enter the total fees due in each column and transfer the total of the three columns to the next line after the organization's membership category line in the center of the front page.
5. For renewals only, enter any late application fee, late payment fee and reinstatement fee that is due on the next lines.
6. Add the organization dues, the individual fees and any late/reinstatement fees and enter the total on the "Total Due" line. This is the amount that needs to be sent to KACE.
7. A supervisor/manager for the organization must sign and date the application on the front page. Your signature here indicates you are requesting approval as a member of KACE and you have the authority to apply for both the organization and the individual memberships requested..

Individuals joining, not sponsored by and organization:

1. Enter the date of application at the top and enter your organization's name and your department if you are employed.
2. Check whether you are a new member or a renewing member.
3. Enter your address information but do not enter anything in the Supervisor section.
4. Enter your contact information in the top section on page 2 and appropriate fee (this will usually be \$20 for and Affiliate Member
5. Enter this amount on the "Individual Membership Fees Due" line on the front page. Do not enter an amount or an organization membership.
6. For a "renewing" individual member, enter any late application fee, late payment fee or reinstatement fee that is due on the next lines and enter the total amount due.
7. You must sign and date where a supervisor signature is indicated at the bottom of the payment box on the front page. Your signature here indicates you are requesting approval as a member of KACE.

If you have questions about completing the form, e-mail your questions to

info@kace-ks.org

BY-LAWS



An ICC Preferred Provider



CHAPTER

ARTICLE II. MEMBERSHIP

Section 1. Certified Members (KACE Certified)

A person involved in the regulation of health and safety in the environment, both natural and man-made, or is otherwise responsible for enforcement of municipal, county, state or federal codes or working in a position or field closely related to either the regulation of health and safety in the environment, both natural and man-made or the enforcement of municipal, county, state or federal code and who resides or is employed in the State of Kansas, shall be eligible for regular membership as a Certified Member once certified by KACE as a Code Enforcement Officer and upon payment of established dues shall be known as a "Certified Member". A Certified Member may use the designation after their name/signature "KACE/CEO" or "CEO/KACE" and shall be eligible to hold any office within KACE subject to any other condition required in the by-laws.

Section 2. Professional Members (not KACE Certified)

A person involved in the regulation of health and safety in the environment, both natural and man-made, or is otherwise employed in or responsible for enforcement of municipal, county, state or federal codes or working in a position or field closely related to either the regulation of health and safety in the environment, both natural and man-made or the enforcement of municipal, county, state or federal code and who resides or is employed in the State of Kansas, shall be eligible for membership as a Professional Member until certified by KACE as a Code Enforcement Officer, and upon payment of established dues shall be known as a "Professional Member". A Professional Member may use the designation after their name/signature "KACE" and shall be eligible to hold any office within KACE subject to any other conditions required in the by-laws.

Section 3. Affiliate Members

Any student, nonresident or individual interested in code enforcement, but not otherwise eligible for membership. Affiliate Members are not entitled to vote on KACE business matters or to hold any positions within KACE other than as a committee member.

Section 4. Honorary, Retired and Agency Members

Honorary member

An honorary member in the Association shall be a person who has rendered outstanding meritorious services for the furtherance of the objectives of this organization. Such persons, upon the motion of any member in good standing, may be elected by the Board of Directors, or by the Association, to Honorary Membership and shall be excused from the payment of dues and assessments. They shall not be eligible to vote or to hold office or be a member of the Board unless they are also a Certified or Professional Member.

Retired Member

A retired member of the association shall be an active member in good standing at the time they retired from employment in the enforcement of housing, health, land use, or other municipal, county, state or federal codes. A retired member shall be entitled to the same rights as a Certified or Professional Member, except that they cannot hold a position on the Board of Directors.

Charter Organization

Any governmental jurisdiction employing or sponsoring one or more Certified or Professional Members shall be eligible for membership as a Charter Organization upon payment of established dues. Charter organizations shall be eligible to vote on matters of KACE concerning certification.

Affiliate Organization

Any commercial entity, governmental agency or non-governmental agency or association interested in supporting the purpose and mission of KACE shall be eligible for membership as an Affiliate Organization. Affiliate Organizations shall be eligible to participate in exhibits or displays at KACE meetings and conferences without charge, but shall not be eligible to vote on matters of KACE.