



An ICC Chapter

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# Organization Member Application 2020

## Kansas Association of Code Enforcement



CHAPTER



PREFERRED EDUCATION PROVIDER

### KACE Memberships are Organization based

Governmental Organizations (cities & counties) are the primary members and **must** have at least one designated individual member enrolled on the following page of the application (see instructions on page 3). Affiliate Agencies and Affiliate Companies **must** be member organizations 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 "Authorizing Contact" section below and **not** completing pg. 2 (see instructions on pg. 3).

**\*Attach as many Individual Member's Information pages (pg. 2) as necessary when submitting.**

Application Date: \_\_\_\_\_ (please circle one): **New** **Renewal**

Organization Name: \_\_\_\_\_ Primary Dep.: \_\_\_\_\_

Organization Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Administrative or Billing Contact Name: \_\_\_\_\_

Title \_\_\_\_\_ E-mail: \_\_\_\_\_

Authorizing Person - Name: \_\_\_\_\_

Title \_\_\_\_\_ E-mail: \_\_\_\_\_

### Please Enter Your Organization Membership Dues and Fees for 2020:

1. Governmental Organization: \$20, \_\_\_ Affiliate Agency: \$20, \_\_\_ Pvt. Comp.: \$ 100, \_\_\_ \$ \_\_\_\_\_

2. Total of Individual Membership Dues (from attached pages), or \$40 for a non gov. affiliate: \$ \_\_\_\_\_

3. For Late Renewal Application submitted after Jan. 31, 2020 add \$10: \$ \_\_\_\_\_

4. For Late Renewal Payment after Feb. 21, 2020 add \$15: \$ \_\_\_\_\_

5. For Reinstatement Fee if Renewal submitted after Feb. 29, 2020 add \$30: \$ \_\_\_\_\_

6. Total Due: \$ \_\_\_\_\_

Memberships not renewed by Feb. 29, 2020 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.

(Add your membership fees and any late or reinstatement fee, if a renewal, and enter total in 'Total' Due' on line 6 above)

Signature: \_\_\_\_\_

Authorizing Person Approval

Date

Please Check One:  Make contact information available in the public directory  
 Make contact information available only to members privately  
 Do not make contact information available

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

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

KACE, c/o Skip Moon, Exec. Mgr., 20922 W. Cedar Ridge Rd., Cleveland, MO 64734

For more information visit KACE online at: [www.kace-ks.org](http://www.kace-ks.org) or e-mail: [info@kace-ks.org](mailto:info@kace-ks.org)



# Individual Member's Information (with dues)

(Enter fee in appropriate column)

Please print employee information

(Check box if Info Form Attached)

Certified \$30	Profess. \$40	Affiliate \$20
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Employee Name: \_\_\_\_\_

Title: \_\_\_\_\_ E-mail: \_\_\_\_\_

Supervisor: \_\_\_\_\_ E-mail: \_\_\_\_\_

Employee Name: \_\_\_\_\_

Title: \_\_\_\_\_ E-mail: \_\_\_\_\_

Supervisor: \_\_\_\_\_ E-mail: \_\_\_\_\_

Employee Name: \_\_\_\_\_

Title: \_\_\_\_\_ E-mail: \_\_\_\_\_

Supervisor: \_\_\_\_\_ E-mail: \_\_\_\_\_

Employee Name: \_\_\_\_\_

Title: \_\_\_\_\_ E-mail: \_\_\_\_\_

Supervisor: \_\_\_\_\_ E-mail: \_\_\_\_\_

Employee Name: \_\_\_\_\_

Title: \_\_\_\_\_ E-mail: \_\_\_\_\_

Supervisor: \_\_\_\_\_ E-mail: \_\_\_\_\_

Employee Name: \_\_\_\_\_

Title: \_\_\_\_\_ E-mail: \_\_\_\_\_

Supervisor: \_\_\_\_\_ E-mail: \_\_\_\_\_

Employee Name: \_\_\_\_\_

Title: \_\_\_\_\_ E-mail: \_\_\_\_\_

Supervisor: \_\_\_\_\_ E-mail: \_\_\_\_\_

Employee Name: \_\_\_\_\_

Title: \_\_\_\_\_ E-mail: \_\_\_\_\_

Supervisor: \_\_\_\_\_ E-mail: \_\_\_\_\_

Employee Name: \_\_\_\_\_

Title: \_\_\_\_\_ E-mail: \_\_\_\_\_

Supervisor: \_\_\_\_\_ E-mail: \_\_\_\_\_

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Supervisor: \_\_\_\_\_ E-mail: \_\_\_\_\_

Employee Name: \_\_\_\_\_

Title: \_\_\_\_\_ E-mail: \_\_\_\_\_

Supervisor: \_\_\_\_\_ E-mail: \_\_\_\_\_

Employee Name: \_\_\_\_\_

Title: \_\_\_\_\_ E-mail: \_\_\_\_\_

Supervisor: \_\_\_\_\_ E-mail: \_\_\_\_\_

( Total each column for all Individuals above and transfer total of all three columns to page 1, line 2)

_____	_____	_____
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## 2020 KACE Membership Application Instructions

(Do not attach this page to application)

### **A. Governmental Organizations with individual members:**

1. Organizations applying for membership should fill out the top half of the form, including the authorized contact's name that is approving the organizations membership and fill out the employee memberships on page 2 of the form.
2. Determine the organization's membership category and enter the appropriate membership dues on line 1 in the center of the form.
3. Enter on page 2 all of the individual memberships being sponsored by the organization, their information and the membership fee for each individual in the appropriate column on the right side of page 2. **First time members will be either Professional or Affiliate Members. Only Professional Members that have been certified by KACE can renew as a Certified member.** Use extra pages if necessary.
4. At the bottom of the last Member List page, enter the total fees due in each column and transfer the total of the three columns to line 2. in the center of the page 1.
5. **For renewal membership applications only**, enter any late application fee, late payment fee and reinstatement fee, as appropriate, that are due on the lines 3, 4 and 5.
6. Add together the organization dues, the individual fees and any late/reinstatement fees and enter the total on the Line 6, "Total Due". This is the amount that needs to be sent to KACE at the address shown at the bottom of page 1.
7. **An authorized contact/representative for the organization must sign and date the application at the bottom of page 1.** Your signature indicates you are requesting a governmental membership as a member of KACE and you have the authority to apply for both the organization and the individual memberships requested.

### **B. Individuals joining, sponsored by an agency or private company (not a governmental 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 and complete the Authorized Contact section.
4. Check either 'Affiliate Agency' or Pvt. Company on line 1 and enter the appropriate fee for the Agency or Pvt. Company membership at the end of line 1.
5. For a "renewing" individual member, enter any late application fee, late payment fee or reinstatement fee that is due on lines 3, 4, and 5 and enter the total amount due on line 6.
6. You must sign and date where an Authorized Contact 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.

### **C. Individuals joining, not sponsored by a governmental 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 and complete the Authorized Contact section.
4. **Do not enter an amount for an organization membership.**
5. For a "renewing" individual member, enter any late application fee, late payment fee or reinstatement fee that is due on the lines 3, 4 and 5 and enter the total amount due on line 6.
6. You must sign and date where an authorized contact's 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, please e-mail your questions to,

info@kace-ks.org



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**BY-LAWS (REFERENCING MEMBERSHIP REQUIREMENTS)**

**(Do not attach this page to application)**

**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.