Texas RACA
Rural Association for Court Administration
2027
Membership Application

Name: _____

Title: _____

Court(s): _____

County(ies): _____

Mailing Address: _____

City/State/Zip: _____

Office phone: _____ Fax: _____

Cell phone: _____ Email: _____

I would like to be considered to serve as a RACA Officer: _____

My county would like to host a future conference: _____

If you are new in this position, please indicate
who you replaced: _____

Any Judge, Court Reporter, Bailiff, etc., who is joining from your court or department as an Associate Member, may make copies of this form to fill out or simply sign their name below, and return with your application along with their membership dues:

Associate Member's Signature: _____

Title: _____

REGULAR MEMBERSHIP	$75.00	ENCLOSED: _____
ASSOCIATE MEMBERSHIP	$15.00	ENCLOSED: _____
	TOTAL ENCLOSED:	_____

Make Check Payable to Rural Association for Court Administration

Return form and payment to:
RACA
c/o Deitra Hill
Potter County
500 S. Fillmore, Ste. 402
Amarillo, Texas 79101