



Mississippi Association of Professional Surveyors

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2025 BUSINESS DUES / MEMBERSHIP APPLICATION STATEMENT

Company _____

Company Address _____

City _____ State ____ Zip _____ County _____

Contact Person _____

Phone: _____

E-Mail Address _____

****All correspondence will be by Email**

Membership Applied for:

___ **BUSINESS MEMBER: Annual Dues \$ 180.00**

A Firm engaged in a business related to Surveying and interested in the advancement of the Surveying Profession with this membership, we will print company business card (**please include business card**) in MAPS newsletter.

- *I agree to abide by the By-Laws and Constitution for the Mississippi Association of Professional Surveyors.*
- *Membership dues are payable on January 1 and must be paid prior to February 1 each year. If the dues are not received by or postmarked by January 15, a 25% late fee will be assessed. If the dues are not received February 15, the membership will be considered inactive.*

Signature _____ Date _____ Year _____