



RHODE ISLAND TAX COLLECTOR'S ASSOCIATION MEMBERSHIP FORM 2025

Name: _____

Municipality/Firm: _____

Title: _____

Address: _____

Phone w/ext: _____

Email: _____

If you have a meeting suggestion, please fill in-we welcome input:

All Memberships will be \$30.00 per year

Regular Member: An appointed or elected Tax Collector, Deputy Tax Collector or head of a department who is actively engaged in the tax collection profession by the State or Municipality within Rhode Island.

Associate Member: Former Tax Collector and anyone interested in Tax Collection not regularly employed by the State or a municipality therein in tax collection or related work.

Please make copies for additional memberships in your office.

Make check payable to: RITCA

Mail to: Stacy Gorman
Town of Narragansett
25 Fifth Avenue
Narragansett, RI 02882

Any questions? sgorman@narragansettri.gov