



## MEMBERSHIP APPLICATION FORM

Association Acronym \_\_\_\_\_ New Association? \_\_\_\_\_

Association Name: \_\_\_\_\_

Incorporation Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

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

Web site address: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Association Contact: \_\_\_\_\_

Address: \_\_\_\_\_

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

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Evening: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Geographical Area \_\_\_\_\_

*(applies to both new and renewal memberships)*

*Note: If a new association is forming within the geographical area of an existing association, a letter of acceptance by the board of directors of the existing association must accompany this application.*

Geographical area changing? Yes  No  *(renewal memberships only)*

**ATTACHMENTS:**

<u>New Association</u>		<u>Renewal Membership</u>	
Completed Application:	<input type="checkbox"/>	Completed Application:	<input type="checkbox"/>
Incorporation Paperwork:	<input type="checkbox"/>	Certification of Good Standing:	<input type="checkbox"/>
Nonprofit Documentation:	<input type="checkbox"/>	Nonprofit Documentation:	<input type="checkbox"/>
Signed Terms of Agreement:	<input type="checkbox"/>	Signed Terms of Agreement:	<input type="checkbox"/>
Bylaws:	<input type="checkbox"/>	Bylaws:	<input type="checkbox"/>
Membership List:	<input type="checkbox"/>	Membership List:	<input type="checkbox"/>
Annual Dues Check:	<input type="checkbox"/>	Annual Dues Check:	<input type="checkbox"/>

**CURRENT OFFICERS:**

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Trustee Contact:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State/Province:** \_\_\_\_\_ **Zip/Postal Code:** \_\_\_\_\_

*Renewals must be postmarked no later than thirty (30) days prior to the annual convention.  
Please send completed application, attachments, AND dues check to the IGRA Secretary at:*

**Larry Lindstrom  
IGRA Secretary  
14741 Tejon Street  
Broomfield CO 80020**

*or:* **[larry.lindstrom@igra.com](mailto:larry.lindstrom@igra.com)**