



Dues Statement

Full Member Annual Dues: \$250.00 for 2005/2006
Associate Member Annual Dues: \$100.00 for 2005/2006 per Associate

With the payment of any Full Membership, an organization may add additional contacts at the same address as non-voting Associate Members. The Associate Members dues are \$100 per person. The Associate member would receive all of the benefits of the Full Member, but will not be able to vote unless voting by proxy for the Full Member.

Full Member Contact Information:

Organization/Business Name: _____
Full Member Contact Name: _____
Address: _____
Mailing Address if different: _____
City: _____ State: IA Zip: _____
Phone: _____ Fax: _____
E-mail: _____ Web Site: _____
Referred by: _____

Associate Member Contact Information:

**Address & Organization/Business must be the same as the Full Member*

Associate Member Contact Name: _____
Associate Member Phone: _____ Fax: _____
E-mail: _____
Associate Member Contact Name: _____
Associate Member Phone: _____ Fax: _____
E-mail: _____

My check is enclosed for: \$

Full Members @ \$250 each = \$
Associate Members @\$100 each = \$
TOTAL ENCLOSED \$

Please make check payable to: **Iowa Meetings Association**
Mail to: **Iowa Meetings Association (IMA)**
219 Crystal Street #103
Ames, IA 50010

OR Fax: (515) 232-1927

Iowa Meetings Association
219 Crystal Street #103
Ames, IA 50010
Phone: 515.971.9925 * Fax: 515.232.1927
Email: dmueggen@gmail.com * Website: www.iowameetings.com