



2022

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"/>
Not-for-Profit Documentation	<input type="checkbox"/>	Not-for-Profit Documentation	<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: \_\_\_\_\_ **President**

Name: \_\_\_\_\_ **Vice President**

Name: \_\_\_\_\_ **Secretary**

Name: \_\_\_\_\_ **Treasurer**

Trustee: \_\_\_\_\_

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

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

*Renewals must be postmarked or received by the secretary no later than **sixty (60) days** prior to the Annual Convention.*

*Please send completed application, attachments, AND **copy** of dues check to the IGRA Secretary at:*

*Please send the Original Check direct to David Hill - Treasurer at:*

**Michael Norman**  
**IGRA Secretary**  
**7601 Kings Ridge Rd**  
**Frisco, TX 75035-7116**

**David Hill**  
**IGRA Treasurer**  
**20140 E Maplewood LN**  
**Centennial CO 80016-1279**

or: m.norman@sbcglobal.net

or:david.hill@igra.com