



**2015-2016 Officers**

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**NEW MEMBER / RENEWAL OF MEMBERSHIP APPLICATION**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

COUNTY \_\_\_\_\_

PHONE \_\_\_\_\_

FAX \_\_\_\_\_

E-MAIL \_\_\_\_\_

MAJOR AG INTEREST \_\_\_\_\_

\_\_\_ I would like to join IAW. Dues \$50 per year, includes AAW membership and IAW/AAW newsletters.

\_\_\_ I would like to support IAW with a contribution of \$\_\_\_\_\_

***Please complete the form  
and send with payment to:***

Jennifer Waters  
IAW Membership Chairman  
4974 Robinson Road  
Pleasant Plains, IL 62677