

IaAWP Membership Registration Form

Please print and fill out the following form to update our records with the most current information. Any information that you do not wish to have published will be duly kept confidential. Dues are \$10.00 yearly. If you attend the Spring Training Conference, your yearly dues are included in the cost of the conference registration.

Send form and dues to the IaAWP Treasurer:

Tiffany Creekmur
c/o Mason City Police
78 S. Georgia
Mason City, IA. 50401

Name: _____

Organization: _____ District: _____

Org. Address: _____

City: _____ Zip [+4 digit]: _____

Rank/Job title: _____

Job description: _____

Work Phone: _____ ext. _____

Work FAX: _____

Work e-mail: _____ Pager: _____

Cell Phone: _____

Home address: _____

City, State, Zip: _____

Home e-mail: _____ Home Phone: _____

Please put an asterisk by the information you do not wish published within our organization.

Mailing preference: Work _____ Home _____

Any other aspects of your job, or areas of expertise that you would like included to be used as future resource please list: