



# Iowa Recycling Association Membership Form

Thank you for interest in becoming an Iowa Recycling Association member. Please fill out this form and e-mail it to [iowarecycling@gmail.com](mailto:iowarecycling@gmail.com). As soon as we've received the form, we'll contact you with information about your membership and dues payment. If you have questions, feel free to contact us at our Gmail address.

**Date** \_\_\_\_\_

**Company** \_\_\_\_\_

**Primary Contact Name/Title** \_\_\_\_\_

**Street address** \_\_\_\_\_

**City, State, Zip** \_\_\_\_\_

**Phone** \_\_\_\_\_

**Email** \_\_\_\_\_

**Website** \_\_\_\_\_

*Check category that BEST describes your company/organization:*

- Equipment Sales/Service
- Recycling Service Provider
- Gov't/Solid Waste Agency
- Hauler
- Manufacturer
- Business/Industry
- Education/College/University
- Consultant
- Nonprofit/Trade Organization

**Professional membership categories**

	<i>Annual membership</i>	<i>New member special rate*</i>	
<input type="checkbox"/> Non-profit/Government/Education	\$175	\$87.50	<p><b>NEW MEMBERS:</b> <i>If you were recruited by an IRA member, please provide name of member here:</i></p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>
<input type="checkbox"/> Small Business (3-50 employees)	\$275	\$137.50	
<input type="checkbox"/> Large Business (50+ employees)	\$375	\$187.50	
<input type="checkbox"/> Individual/Micro-business (1-2 employees)	\$75	\$37.50	
<input type="checkbox"/> Student (non-voting)	\$25	n/a	

*\* Special rate is available to any business, organization or individual joining the IRA for the first time. (Past members rejoining the organization are not eligible for this rate.)*

*Payment may be made by check, credit card or PayPal. You will be contacted with details. Membership dues are payable on an annual basis for the fiscal year (July 1 – June 30). New member special rates apply to the first three quarters of the fiscal year (July through March). When joining in the 4<sup>th</sup> quarter, new members pay full price for a 15-month membership.*

Please provide information for a two- to three-sentence company profile for the IRA's online [Member Directory](#):

The primary contact listed above will receive our monthly e-newsletter and weekly legislative updates during the Legislative Session. If others in your company or organization would like to receive this electronic communication, please provide e-mail addresses here:

\_\_\_\_\_

The primary contact will also receive electronic communication regarding billing/membership renewals unless a different e-mail address is provided here: \_\_\_\_\_