

**ILLINOIS AGRICULTURAL AVIATION ASSOCIATION
MEMBERSHIP APPLICATION FORM**

Thank you for your interest in joining our association. Please complete and submit this form, along with the appropriate dues amount, to: IAAA, 1276 Highway 94, Aledo, IL 61231. Questions? Call: 309/582-5445 or Email: garrett@lindellaerialag.com

PERSONAL INFORMATION

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Email: _____

COMPANY NAME

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____

MEMBERSHIP CATEGORIES (PLEASE SELECT ONE)

_____ Operator \$200 *FAR137 Cert.#* _____

_____ Affiliated Operator \$50

_____ Pilot \$50

_____ Allied Industry Company \$ 200

_____ Affiliated Allied \$50

_____ Associate (non-voting) \$20