



MEMBERSHIP APPLICATION

TYPE OF MEMBERSHIP: (Please check)

- ORGANIZATION (\$75) – includes up to 4 representatives
- INDIVIDUAL (\$35)
- STUDENT (\$20) – MUST BE ENROLLED IN AT LEAST ONE COURSE

FOR A COMPLETE COPY OF OUR BY-LAWS PLEASE SEE OUR WEBSITE
AT : <http://WWW.INTERMOUNTAINGIS.ORG>

Please make checks payable to NR URISA

Checks can be sent to NR URISA
 P.O. BOX 322
 KELLOGG, ID 83837

Member Information:

Name _____

Organization _____

Job Title _____

Address _____

Phone _____

Email _____

PLEASE PLACE AN ASTERISK NEXT TO YOUR PREFERRED CONTACT METHOD