



## MEMBERSHIP APPLICATION

Firm Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Primary Service/Product: \_\_\_\_\_

Mailing Address (include Street Address): \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact Email(s) (may include more than one): \_\_\_\_\_

Website Address: \_\_\_\_\_

I/We hereby apply for membership in the following category – PLEASE NOTE THAT ALL MEMBERSHIPS ARE FOR TWO YEARS:

Contractor - \$410 for two years ( Contractor certification # \_\_\_\_\_ Business Permit # \_\_\_\_\_

Supplier, Manufacturer, Vendor, Professional or Manufacturer Representative - \$900 for two years

Associate, all other (non-voting)\* \$390 for two years

*Membership is available to: retired former members, allied organizations, governmental bodies, educational facility members, students or interested parties who do not derive income from irrigation related sales or contracting, or additional listings per company.*

MAIN COUNTY: \_\_\_\_\_ ADDITIONAL COUNTIES: \_\_\_\_\_

TOTAL AMOUNT DUE: \$ \_\_\_\_\_

Payment  American Express  MasterCard  Visa  Discover  Check# \_\_\_\_\_ (payable to IANJ)

Card Number: \_\_\_\_\_ Exp: \_\_\_\_\_ CVV Code: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Title: \_\_\_\_\_

I/We hereby apply for membership in the Irrigation Association of New Jersey, subject to the Association's bylaws.

I/We hereby certify that all the information provided above is true and correct including my/our dues category.

Authorized Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

Referred by: \_\_\_\_\_

Board of Trustee Signature: \_\_\_\_\_

*\* This application must be completed and signed and dues payment must accompany application. MEMBERSHIP RENEWAL IS BI-ANNUAL. This form may be duplicated.*

Please return completed application, checks payable to  
Irrigation Association of New Jersey (IANJ)

Irrigation Association of New Jersey  
PO Box 518  
Mt. Laurel, NJ 08054  
Tel: 973-850-3366  
Fax: 856-727-9504

All applications **MUST** be signed by a member of the IANJ and a Trustee of the Board.

JOIN ONLINE AT [www.ianj.com](http://www.ianj.com)