

Iowa Association of the Deaf

Membership Application

2021—2023

Name	
Address	
City	
State/Zip	
Email Address	
Phone	
Alt. Phone	

Please check the contact information you want in the next IAD Directory:

- All of my contact information
- Videophone
- Text
- Email
- Mailing Address
- I do not want my information in the next directory.

<ul style="list-style-type: none"> <input type="checkbox"/> Active—\$20 or FREE (if you are 25 years old or younger (with a proof of age)) <input type="checkbox"/> Associate—\$20 <input type="checkbox"/> Senior Citizen—\$20 <input type="checkbox"/> Organizational—\$20 	<p style="text-align: center;">Make a check or money order payable to: Iowa Association of the Deaf And mail this form with payment to:</p> <p style="text-align: center;">Sandra Anderson, Treasurer Iowa Association of the Deaf 3138 Whispering Ridge Lane Riverside, IA 52327</p>
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Definition of membership types:

Active: Deaf adult resident of Iowa

Associate: Hearing adult resident OR deaf adult residing in another state than Iowa

Senior Citizen: Deaf adult age 60 and up

Student: Deaf student in grades 9-12 or college

Organizational: Any organization that wishes to support IAD and be recognized as a supporting member