



# 2017 MEMBER INVOICE

(State, Federal/National or International)

Federal I.D. #59-3454873

Name \_\_\_\_\_

Title \_\_\_\_\_

Agency/Organization \_\_\_\_\_

\_\_\_\_\_

Business Mailing Address \_\_\_\_\_

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

Business Phone \_\_\_\_\_ Business Fax \_\_\_\_\_

Email Address \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

### MEMBERSHIP TYPE:

- |   |  |
|---|--|
| <input type="checkbox"/> Full \$100.00                | <input type="checkbox"/> Educational Associate 25.00 |
| <input type="checkbox"/> Individual Associate \$10.00 | <input type="checkbox"/> Student Associate \$10.00   |

**NOTE:** Membership is effective from January to December of each calendar year. **Full membership** is available to state, federal/national or international agencies, divisions, or branch offices of agencies whose responsibilities fall within the scope of at least three of the following motor vehicle/lemon law activities: legislation, enforcement, education, research, complaint handling, licensing, advocacy before government units, public policy development, and dispute settlement. **Associate membership** is available in three categories, Individual, Educational or Student. Individual Associate is open to additional employees at the same location of the agency that is a Full member. Individual Associates cannot qualify without a corresponding Full membership. Educational Associate is open to non-profit institutions of higher learning, which have educational programs that meet any of the activity criteria for Full membership. Student Associate is opened to students enrolled in a degree-granting program, which meets any of the activity criteria for Full membership. Student Associate cannot qualify without a corresponding Educational Associate membership)

### I am interested in serving on the following committees:

- |  |  |                                     |
|--|--|-------------------------------------|
| <input type="checkbox"/> Public Policy         | <input type="checkbox"/> Membership/Corporate Relations. | <input type="checkbox"/> Conference |
| <input type="checkbox"/> Nominations/Elections | <input type="checkbox"/> Web Site                        | <input type="checkbox"/> By Laws    |

**Please return this completed invoice via fax, email or mail (check box to indicate method).**

Paying via Paypal: **Please email or fax this Invoice and a copy of the receipt to:**

Fax: (608) 266-9552 - Email: iallatreasurer2@yahoo.com

Paying by check or money order:

**Please mail this Invoice with the check or money order payable to IALLA, to:**

International Association of Lemon Law Administrators  
P.O. Box 46096  
Madison, WI 53744  
ATTN: John Remy

Questions? Contact José Escobar, [membership@ialla.net](mailto:membership@ialla.net)