

# Iowa Head Start Association

## INDIVIDUAL MEMBERSHIP APPLICATION

*Please complete and return with dues.*

NAME: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_ POSITION: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

PRIMARY CONTACT: \_\_\_\_\_ EMAIL: \_\_\_\_\_

\*All members are automatically added to the general IHSA distribution list. To opt out, check this box:

SECONDARY CONTACT: \_\_\_\_\_ EMAIL: \_\_\_\_\_

\*All members are automatically added to the general IHSA distribution list. To opt out, check this box:

MEMBERSHIP TYPE (check one):

**\$20 – Bronze Individual Membership**

Member discount on all trainings and networking as posted on flyers.  
Added to the general IHSA distribution list.

**\$50 – Silver Individual Membership**

Member discount on all trainings and networking as posted on flyers.  
Added to the general IHSA distribution list.  
Certificate of Appreciation from the IHSA.  
Recognition at the IHSA annual meeting.



**\$100 – Gold Individual Membership**

Member discount on all trainings and networking as posted on flyers.  
Added to the general IHSA distribution list.  
Certificate of Appreciation from the IHSA board.  
Recognition at the annual meeting.  
VIP seating at the IHSA annual meeting meal.  
IHSA annual meeting meal paid for.

Please return completed forms to: [ashley@iowaaeyc.org](mailto:ashley@iowaaeyc.org) or send hard copy to 5525 Meredith Dr., Suite F, Des Moines, IA 50310. Make checks payable to IHSA.

Thank you for supporting IHSA!