

**IOWA GEOTHERMAL ASSOCIATION  
MEMBERSHIP APPLICATION**



All prospective members of IGA are required to complete this application form. Membership runs from January 1 to December 31.

**SECTION 1: MEMBER CONTACT INFORMATION**

<b>NAME</b>			
<b>COMPANY</b>			
<b>MAIL ADDRESS</b>			
<b>CITY</b>		<b>WORK PHONE</b>	
<b>ZIP CODE</b>		<b>PRIMARY EMAIL</b>	
<b>IA CONTRACTOR LICENSE # (For Mbr. Class)</b>		<b>FAX #:</b>	

**SECTION 2: MEMBERSHIP TYPE AND PAYMENT DETAILS**

MEMBER TYPE	DESCRIPTION	MEMBERSHIP DUES (Annual)	Please Check
<b>CONTRACTOR</b>	Contractor Membership (contractor license #)	\$250*	
<b>ASSOCIATE</b>	Associate Membership (no contractor license #)	\$200**	
<b>UTILITY</b>	Investor Owned Utility \$1000   REC \$150	Investor Owned Utility \$1000   REC \$150	
<b>EQUIPMENT DIST.</b>	Equipment Distributor	\$400	
<b>MANUFACTURE</b>	Manufacture – parts/accessories \$750 or Units\$1000 (circle)	\$750 or \$1000	
<b>TECHNICIAN</b>	Non-voting, Technician(may be used for IGHSPA credit)	\$125***	
<b>PAYMENT METHOD</b>	<input type="checkbox"/> Check #	Prorata@ 8.33% for each remaining full month in year	

**SECTION 3: MEMBER INFORMATION**

CONTRACTOR MEMBERSHIP	ASSOCIATE MEMBERSHIP
Years in HVAC business:	Years in business:
No. technicians employed (for legislative purposes):	<b>Primary business:</b> Architect/Engineer <input type="checkbox"/> Distributor <input type="checkbox"/> Utility <input type="checkbox"/> Equipment Mfg. <input type="checkbox"/> Owner/User <input type="checkbox"/>
IGSHPA accredited?	
<b>Primary business:</b> Builder <input type="checkbox"/> Design <input type="checkbox"/> Driller <input type="checkbox"/> HVAC Installer <input type="checkbox"/> Loop Installer <input type="checkbox"/>	

**Brief Description of your business:**

**As a Contractor if you would like a free company listing on the “Find a Dealer” page on the IGA website, please print the county your business is located in:** \_\_\_\_\_

**Full payment of dues must accompany application for membership. Mail (DO NOT SCAN AND E-MAIL) application and check payment to:**

**Iowa Geothermal Association  
15920 Hickman Rd. #400  
Clive, IA 50325**

**As a member of the Iowa Geothermal Association, I agree to abide by its bylaws.**

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Referred by:** \_\_\_\_\_ **Date:** \_\_\_\_\_