

Name: _____
(Please Print) Last First

Home: _____
(Mailing Address) Street or Box Number City State Zip+4 (Area) Phone Number

Name of School: _____ **School District:** _____
(Or Business)

School: _____
(Or Business) Street or Box Number City State Zip+4 (Area) Phone Number

FAX Number: _____ **E-Mail Address:** _____

IBA District (Circle One): NE NC NW SE SC SW OS _____ Check here if you **DO NOT** want your e-mail address and school information available on the I.B.A. website
(School or Business Location)

Job Description (Check all applicable) Instrumental Music: Elementary _____ MS _____ JH _____ HS _____ College _____
Music Supervisor _____ Admin. (Non-music) _____ Vocal _____ Other _____

Years Teaching - Not Counting This Year: _____ **Student Members -Year in School:** _____ **New Member:** _____
(Not a Member Last Year)

Active (\$65) _____ **Associate (\$35)** _____ **Retired (\$20)** _____ **Student (\$10)** _____ **Date:** _____

Place
First Class
Postage Here
If Mailing
Separately

IOWA BANDMASTERS ASSOCIATION, INC.

Steven Cook, I.B.A. Secretary

1909 Otley Avenue

Perry, IA 50220-2104