Organizational Membership Application

Our mission: A safe, healthy environment and sustainable future for Iowa.

Name of Organization:				
Address:				
City:			Zip:	
Nature of Organization	n (non-profit, vol	unteer group, bu	ısiness, limited liabil	ity, etc.):
Mission or business foo	cus:			
Tall us why you would	like to be a mom	han of the Iowe]	Environmontal Cour	ail.

Tell us why you would like to be a member of the Iowa Environmental Council:

Primary Contact - all information fields are required

Name:

Position/Title:

Address:

Phone:

Email:

Alternate Contact – all information fields are required

Name:

Position/Title:

Address:

Phone:

Email:

The applicant acknowledges that it is supportive of the Iowa Environmental Council's vision and mission. All organizational applicants must be approved by the Board of Directors of the Iowa Environmental Council. By signing, the applicant acknowledges that he/she is authorized to fill out the application on behalf of the organization or business.

Signature of Applicant:

Date:

Print Name:

Submit this application by email to jacobson@iaenvironment.org or mail it to the attention of Kitty Jacobson to:

Iowa Environmental Council 521 E. Locust, Suite 220 Des Moines, IA 50309

Questions? Contact Kitty Jacobson at jacobson@iaenvironment.org or 515-244-1194 x 200