



WIAAA/NIAAAA

Membership Application
2018-19



Name _____ School _____

Home Address _____
Street / P.O. Address City

_____ State Zip

Phone (H) _____ Work (307) _____

(Cell) _____

***Date of Birth: _____ ***SS # _____

***Smoker: YES NO

E-mail Address: _____

Shirt Size (circle one) UniSex S M L XL XXL _____ (other)

Years as Athletic Director: _____ (please list – important)

WIAAA Dues	\$45.00
NIAAAA Dues	\$80.00
	=====
Total	\$125.00

____ Voucher ____ Check ____ Cash

**REMIT PAYMENT &
APPLICATION TO:**

**Larry Yeradi
WIAAA Treasurer
PO Box 490
Wright, WY 82732**

Benefits of the NIAAAA:
\$2500 Life Insurance
Liability Insurance
LTC Courses at Reduced Rates
IAA Magazine
National Conference
National Certification

Benefits of WIAAA:
Award Eligibility
Professional Development LTC
Conferences –WCA/WIAAA
Networking with State A.D.s
Leadership Opportunities
Scholarship Opportunities

*** Are for Insurance Purposes