



MADISON AREA IRIS SOCIETY NEW MEMBER APPLICATION

DATE: _____

NAME: _____

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____

CELL: _____

EMAIL: _____

MAIL CHECKS PAYABLE TO: MADISON AREA IRIS SOCIETY

MAIL CHECKS TO:
KATHLEEN MYHRE
205 W LAKEVIEW AVENUE
MADISON, WI 53716

DUES PER CALENDAR YEAR:
SINGLE \$5.00
DUAL \$7.00