IDAHO MOUNTED ORIENTEERING MEMBERSHIP APPLICATION

____ INDIVIDUAL ($20) YEAR _____
____ FAMILY ($30—Includes children under 21 years living at home) (Jan. 1 - Dec. 31)

I/we hereby apply for membership and agree to comply with all rules of Idaho Mounted Orienteering.

LAST NAME *(please print)*	FIRST NAME *(please print)*	DOB *(required if <18)*

ADDRESS: _____
Street/P.O. Box City State Zip Code

PHONE(S): _____ _____ _____ _____
Home Work Cell E-mail

Is it OK to publish your name, address, phone number(s) and E-mail address in the club directory?

___ YES ___ NO—(no to which part? _____)

Make check or money order payable to Idaho Mounted Orienteering (or IMO) and mail to:
Susan Harrison, Treasurer, Rt. 1, Box 1283, Fairfield, ID, 83327
Checks returned for nonpayment will be assessed any fees charged to IMO.

Updated 1/12

IDAHO MOUNTED ORIENTEERING MEMBERSHIP APPLICATION

____ INDIVIDUAL ($20) YEAR _____
____ FAMILY ($30—Includes children under 21 years living at home) (Jan. 1 - Dec. 31)

I/we hereby apply for membership and agree to comply with all rules of Idaho Mounted Orienteering.

LAST NAME *(please print)*	FIRST NAME *(please print)*	DOB *(required if <18)*

ADDRESS: _____
Street/P.O. Box City State Zip Code

PHONE(S): _____ _____ _____ _____
Home Work Cell E-mail

Is it OK to publish your name, address, phone number(s) and E-mail address in the club directory?

___ YES ___ NO—(no to which part? _____)

Make check or money order payable to Idaho Mounted Orienteering (or IMO) and mail to:
Susan Harrison, Treasurer, Rt. 1, Box 1283, Fairfield, ID, 83327
Checks returned for nonpayment will be assessed any fees charged to IMO.

Updated 1/12