

## 2024-2025

## MEMBERSHIP APPLICATION

Over 1,000 members can't be wrong! Join them and be a part of IRWA today!

Please mail your payment for dues to: Illinois Rural Water Association PO Box 49 Taylorville, IL 62568

All dues except Voting may alternatively pay on-line at www.ilrwa.org under the membership/Join IRWA link

Name:					
Address:					
City:	State	:	Zip:		
County:	Phone:			Fax:	
E-mail:		\	Website:		
Name of Contact Person: (all	mailings will	be sent to	this person	n):	
(If joining as a Voting memb	er only plea	se list th	e following	g):	
Number of Water Connections	s:	Numb	er of Waste	ewater Connections	<b>3</b> :
Name of Water Systems Open	ations Speci	alist:			
Name of Wastewater Systems	operations	Specialist	::		
Please	Circle the T	ype of M	ember you	are joining as:	
Voting dues are \$294.00 base BAS Water Connections Wastewater Connections TOTAL AMOUNT	E RATE = .	\$ 294.0	0		
Supporting—\$555.00					
Associate—\$357.00					
Secondary Associate—\$79.00	)				
S.O.U.P.—\$50.00					