

How to Join

Complete this Membership / Application Form!

Annual Membership Fee \$25.00

Membership ID Number: (to be assigned)

48 - _____ - 480



First Name: _____ **Last Name:** _____

Social Media / Artist Website: _____

Email: _____ **Phone:** _____

Please tell us a little about yourself: (check all that apply)

Artist / Band Name: _____

As an Artist/Musician what do you do? (check all that apply)

<input type="checkbox"/>	Songwriter (Music & Words)	<input type="checkbox"/>	Lyrlist (words only)	<input type="checkbox"/>	Musician (instrument only)
<input type="checkbox"/>	Recording Engineer	<input type="checkbox"/>	Sound Engineer	<input type="checkbox"/>	Music Producer
<input type="checkbox"/>	Other:	_____			

As an IAM Member what are your interests? (check all that apply)

<input type="checkbox"/>	Event Booking (gigs)	<input type="checkbox"/>	Music Collaboration	<input type="checkbox"/>	Audio / Video Recording
<input type="checkbox"/>	Artist Workshops	<input type="checkbox"/>	Music Distribution	<input type="checkbox"/>	IAM Volunteer
<input type="checkbox"/>	IAM Fundraising	<input type="checkbox"/>	IAM Elected Officer	<input type="checkbox"/>	IAM Committee Member
<input type="checkbox"/>	Other:	_____			

Billing Address: _____

City: _____ **State:** _____ **Zip** _____