

Iowa IAHPERD Membership Registration

Checks payable to: Iowa AHPERD

Mail to: Iowa AHPERD PO Box 424 Center Point, IA 52213

NAIVIE .			
ADDRESS: _			
CITY:		STATE:	ZIP:
PHONE:			
EMAIL:			
Circle your le	vel: Student	Professional	Retired
Students - College/University that you are attending:			
Professionals - School District you are affiliated with:			
Circle what do	o you teach:	Physical Education	Adaptive Physical Education
	Health	College Level	Other:
Membership ⁻	Туре:		
\$0	First Year Membership (Steve France Memorial)		
\$35	1 Year Professional Membership		
\$84	3 Year Professional Membership		
\$15	Yearly Student Membership		
\$0	Retired Membership (previous IAHPERD Member for 10 years)		
\$420	Lifetime Membership		