



Membership Form

Company Name _____

Primary Contact _____

Business Address _____

City _____ State _____ Zip _____

Phone Number _____ Fax Number _____

Email Address _____

Website _____

Year Business Was Established _____ # of Employees _____

Please remit payment of dues, according to this dues structure.

Take 10% Off Dues if Paid By November 15

0-3 employees _____ \$250

4-8 employees _____ \$450

9-14 employees _____ \$650

15 and over _____ \$850

Associate _____ \$500.

Iowa Collision Repair Association

P.O. Box 1577 Iowa City, Iowa 52244

(An associate is any industry segment not a collision repair shop)

Non-Deductible Statement:

Dues payments to the Iowa Collision Repair Association may be deductible as an ordinary and necessary business expense, but are not deductible as charitable contributions for federal income tax purposes. The portion of your ICRA dues expended on lobbying (42%) is not deductible. Therefore, 58% of your ICRA dues are tax deductible.

Don't Stand Alone-Join Your Industry To Make A Difference

Please mail your check today, or go to www.iowacra.com and pay on line.

Credit Card Type _____ Card Number _____ Exp. Date _____

Fax to ICRA

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Any questions, comments, suggestions, please call Janet Chaney 480.720.2565

Strengthening The Industry

www.iowacra.com