



## MEMBERSHIP APPLICATION

Please PRINT All of the information requested on this application form. Thank you.

DATE: \_\_\_\_\_, \_\_\_\_\_

NEW  RENEWAL

PLEASE CHECK PREFERENCES	MAILING ADDRESS	<input type="checkbox"/>	WORK
		<input type="checkbox"/>	HOME
	NEWSLETTER	<input type="checkbox"/>	EMAIL
		<input type="checkbox"/>	US POSTAL

NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP (+4): \_\_\_\_\_ HOME PHONE: (    ) \_\_\_\_\_

EMPLOYER / AGENCY / FIRM: \_\_\_\_\_ ASSIGNMENT/OCCUPATION: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ BUSINESS PHONE: (    ) \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_ BUSINESS FAX: (    ) \_\_\_\_\_

***BOTTOM Section For New Membership Applications ONLY:*** SPONSOR (if any): \_\_\_\_\_

*To assist the Membership Committee in assessing your qualifications, please provide the following information. If you are ACTAR Certified all we need is your ACTAR number \_\_\_\_\_. Otherwise please send copies of Accident Reconstruction Certificates such as At-Scene, and Advanced/Technical Reconstruction, or Vehicle Dynamics, or Reconstruction, or Traffic Accident Reconstruction Certificate. Failure to include required documentation will delay the processing of your application. Use additional pages if necessary.*

Special Education or Training as it relates to accident investigation or reconstruction:


Other interests or reasons for wanting to become a member of IATAI:

\_\_\_\_\_

\_\_\_\_\_

Other organizational affiliations or certifications:

\_\_\_\_\_

\_\_\_\_\_

Website: [www.iatai.org](http://www.iatai.org)

***Signature:*** \_\_\_\_\_

IATAI membership runs from January 1st to December 31st of each year. Membership dues are \$45.00 per year. Make checks, money orders or purchase orders payable to IATAI. IATAI membership does not imply any certification as to training and qualifications. IATAI provides an educational service to its members through sponsored seminars and its newsletter. Please return completed applications to: **IATAI: c/o Susan Shigemura, 7610 Roberts Road, New Berlin, IL 62670.** Email: [sushig@dtmspeed.net](mailto:sushig@dtmspeed.net). Dues payment can be made with your PAYPAL account, payable to [webmaster@iatai.org](mailto:webmaster@iatai.org)