

This membership is good for one year.

The IHPVA is a corporation organized under the Nonprofit Public Benefit Corporation Law for charitable purposes [Section 501(c)(3)]. PO Box 30843 • Seattle, WA 98113 USA • Phone 775.455.0990 Website: IHPVA.ORG / WHPSC.ORG

Annual Membership Form

Name
Business/School
Mailing Address
City, State
Country, Zip/Postal code
Email
Phone: Work Home/Mobile
Name & Date of Event (if applicable)
Date of this application
Please check if this is a New Application: or Annual renewal:
Payment by: Check Credit Card Cash
If your dues have been prepaid by someone else, please enter their name here:
WHPSC entrants and team members have the option of paying as part of the event entry fees for their team. Check here if using this option and bring a completed hardcopy form to the WHPSC event.
If you are paying for multiple entrants/team members, please list their names here::
Individual Membership Fee: \$35.00 USD Annual
Fee Paid
VISA/Mastercard no.:
Expiration Date: Month/Year 3-digit code Zip

Make checks payable to: IHPVA.

Please mail this form and payment to:

IHPVA PO Box 30843 Seattle, WA 98113 USA

Questions? -- ihpvatreasurer@gmail.com