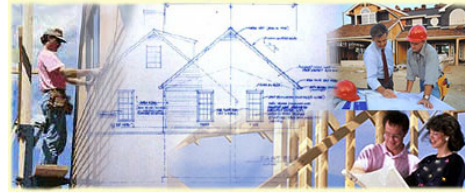




Central Iowa's Best Kept Secret



IHBA Membership Application

Business Name: _____

Owner's Name: _____

Address: _____

_____ City State Zip code

Business Specialty: _____

Contact Information:

Work Phone: _____

Cell or Home Phone: _____

E-mail Address: _____

Type of Membership Requested

Regular Member (Builders, Developers, etc.)
\$500 / Annually, \$400 if paid before February 28th

Associate Member (Non-trade business and individuals.)
\$350 / Annually, \$250 if paid before February 28th

Mail Completed Application, with payment to:

IHBA
PO Box 564
Indianola, IA 50125