

American Iris Society

RVP Report to Affiliates Chairman

Region: _____

Name of Society: _____

1. Are all officers AIS members? _____ (not required for membership)

(If not, return application to society president)

2. Number of AIS members _____

Number of non-AIS members _____

Total members _____

Note: Spouses and youth members all count

3. Is the \$50 check attached?

Yes _____ No _____ (Please indicate below why it was waived)

40+ AIS Members _____ New Affiliate _____ 50% AIS Members _____
* (Must have at least 10)

Attach application. (Please detach membership lists.)

4. Mail to Affiliates Chairman (As early as you can, but NLT 28 February.)

Date verified: _____

RVP Signature

RVP email

&

telephone

Brad Kasperek
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