



# REGULAR MEMBERSHIP APPLICATION



IOWA RESTAURANT ASSOCIATION / NATIONAL RESTAURANT ASSOCIATION DUAL MEMBERSHIP

<b>First Establishment</b>	<b>\$35 per month</b>
<b>Each Additional Establishment</b>	<b>\$15 per month</b>

Ninety-four percent of your dues is deductible as an ordinary and necessary business expense for federal income tax purposes.

Business name \_\_\_\_\_  
 Corporate name \_\_\_\_\_  
 Contact name \_\_\_\_\_  
 Title \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
 County \_\_\_\_\_  
 Email \_\_\_\_\_  
 Phone [ ] \_\_\_\_\_  
 Website \_\_\_\_\_  
 Number of establishments \_\_\_\_\_

I understand my membership continues from year to year and is automatically renewed. I also understand my credit card or checking account will be electronically debited on the 15th of each month. I understand if I choose to discontinue my membership, I must give written notice to the Iowa Restaurant Association's business office 30 days prior to the next scheduled monthly payment. I certify the foregoing statements are correct and agree, if accepted for membership, my membership will be governed by the Bylaws of the Iowa Restaurant Association.

[Signature]

[Date]

## MONTHLY DUES

Please attach contact information for all locations.

### Billing Information *if different* from above

Contact name \_\_\_\_\_  
 Title \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
 Email \_\_\_\_\_  
 Phone [ ] \_\_\_\_\_

<b>First Establishment</b>	\$	35
<b>Add'l establishments x \$15 per month</b>	\$	_____
<b>Total Monthly Investment *</b>	\$	_____

### Electronic Debit from Credit Card (circle one)

American Express   Discover   MasterCard   Visa

Name as it appears on card \_\_\_\_\_  
 Card # \_\_\_\_\_  
 Expiration Date \_\_\_\_/\_\_\_\_

I authorize the IRA to charge my account as instructed until either party notifies the other in writing within 30 days of any changes.

Card Holder Signature \_\_\_\_\_

### Electronic Debit from Checking Account

Please attach a **voided** check. Debit amount \$ \_\_\_\_\_

I authorize the IRA to electronically debit my account. The debit instructions will remain in place until either party notifies the other in writing within 30 days of any changes.

Authorization \_\_\_\_\_

\*\$25 administration fee for non-electronic debits

### Office Use

Process Credit Card \_\_\_\_\_ E-mail Receipt \_\_\_\_\_ Process ACH \_\_\_\_\_ [15 / 24]  
 Peachtree 4001 / 5410 \_\_\_\_\_ Database \_\_\_\_\_ FBIQ \_\_\_\_\_ Fishbowl: Ed [60 mi] \_\_\_\_\_  
 Web App \_\_\_\_\_ Password \_\_\_\_\_



### Smart App and Restaurant Locator Information

Cuisine Type \_\_\_\_\_  
 Area \_\_\_\_\_  
 Facebook \_\_\_\_\_

### Amenities:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Banquet Facility | <input type="checkbox"/> Children's Menu  | <input type="checkbox"/> Patio                 |
| <input type="checkbox"/> Bar              | <input type="checkbox"/> Comedy           | <input type="checkbox"/> Karaoke               |
| <input type="checkbox"/> Billiards        | <input type="checkbox"/> Dance Floor      | <input type="checkbox"/> Pool                  |
| <input type="checkbox"/> Breakfast Menu   | <input type="checkbox"/> Darts            | <input type="checkbox"/> Live Music            |
| <input type="checkbox"/> Buffet           | <input type="checkbox"/> Delivery         | <input type="checkbox"/> Reservations Accepted |
| <input type="checkbox"/> Carry Out        | <input type="checkbox"/> Drive Thru       | <input type="checkbox"/> Other _____           |
| <input type="checkbox"/> Casino           | <input type="checkbox"/> Games            |  |
| <input type="checkbox"/> Catering         | <input type="checkbox"/> Gluten Free Menu |  |
| <input type="checkbox"/> Dine Well Menu   | <input type="checkbox"/> Golf             |  |

Please return this form along with payment information to:

Iowa Restaurant Association

8525 Douglas Avenue, Suite 47 | Des Moines, IA | 50322-2929

dorothyg@restaurantiowa.com | 515 / 276-1454 | 800 / 747-1453