

SUBSCRIPTION FORM.

Use Mailing Label, or Print Legibly.

Circle Your Federation

(C, EC, NE, QC, SE, SW, SL, None)

Date _____

Name: _____

Address _____

City _____

State _____ Zip +4 _____

Optional Information:

Your Club Name: _____

Phone: _____

Email _____

CIRCLE ONE: New Subscription Renewal Change
of Address

Send this form with check for \$15.00 payable to:

IA STATE FEDERATION

to the State Subscription Managers:

**Denny & Lyle Moore
27810 195th ST
Bloomfield, IA 52537**

Phone: (641) 675-3868

Email: lemden@netins.net

(Last Updated -March 2020)

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