

# NEW MEMBER REPORT FORM

**THE IZAAK WALTON LEAGUE OF AMERICA, INC.**  
**NATIONAL OFFICE**  
**707 Conservation Lane, Gaithersburg, MD 20878-2983**  
**1-800-IKE-LINE • 301-548-0150 • Web: [www.iwla.org](http://www.iwla.org)**



DATE \_\_\_\_\_

DIVISION AND CHAPTER NUMBER \_\_\_\_\_

CHAPTER NAME \_\_\_\_\_

NAME AND TITLE OF OFFICER \_\_\_\_\_

DAYTIME PHONE NUMBER \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

## INSTRUCTIONS:

- List only NEW members on this form. Use the following "Member Type" abbreviations:  
 RG = Individual FM = Family ST = Student YH = Youth LF = Life FL = Family Life LB = Life Benefactor FB = Family Life Benefactor
- Type or clearly print names, addresses, phone numbers, and other information.
- Place an "X" in the appropriate column for each member to indicate the length of membership.
- Please note that a date of birth is required for Student and Youth members and is preferred for all members.
- Enter an e-mail address for as many of your new members as possible.
- If the member is an expired chapter or at-large member, please record the PRIOR ID # in the "Former Member" column.
- Total the number of new members submitted on this form and mark it in the box at the lower right.
- Send the National Office the white and yellow copies of this form with a completed Tally Sheet. Keep the pink copy for your records.

MEMBER TYPE	BIRTH DATE (mm-dd-yy)	NAME (First, Initial, Last)	ADDRESS (Street, Apt., P.O. Box, City, State, Zip)	E-MAIL	PHONE NUMBERS (home, work, cell)	MEMBERSHIP Length (in years)			FORMER MEMBER ID #
						1	½	1 ½	

TOTAL NEW MEMBERS \_\_\_\_\_