



CALIFORNIA STATE DIVISION

International Association for Identification

2010 Active and Associate Membership Invoice

Membership Dues (Received prior to February 1, 2010) - \$35.00

Late Fee (Received after February 1, 2010) - \$10.00

Total with Late Fee - \$45.00

Make payment to CSDIAI and mail to:

CSDIAI Secretary-Treasurer

Russell Silcock

P.O. Box 10

Roseville, CA 95678-0010

CHECK ONE:

Active Member

Associate Member

Name: _____

Member No: _____

Article II, Section 3, Sub-Section A of the Bylaws requires that all membership dues must be received by the CSDIAI Secretary-Treasurer before February 1 of each year or the member will become delinquent and will be removed from the mailing list. Sub-Section C provides for a late fee of \$10.00 if received after that date. All delinquent members will be dropped from membership on October 1, 2010.

In order to update your membership record, please fill this form out completely.

This invoice, or a copy, must be returned with your dues payment.

HOME ADDRESS

Street: _____

City: _____

State: _____ Zip: _____

Home phone: _____

MAILING ADDRESS: Home Address

Work Address

ALTERNATE MAILING ADDRESS

Street: _____

City: _____

State: _____ Zip: _____

WORK/DIRECTORY ADDRESS

Title: _____

Employed by: _____

Agency: _____

Street: _____

City: _____

State: _____ Zip: _____

Work phone: _____

Fax Number: _____

Cell Number: _____

Email Address: _____

Please fill in the following:

Would you like the Digest emailed to the above address? Yes No, via U.S. Mail

Are you actively employed with a law enforcement agency? Yes No

Are you currently a member of the IAI Parent Body? Yes No If yes, member number _____

Are you interested in serving on a committee? Yes No If yes, which one _____

Are you an IAI Certified Latent Print Examiner? Yes No If yes, certificate number _____

Are you certified by the IAI in Crime Scenes? Yes No If yes, indicate level _____

Are you certified by the IAI in any other discipline(s)? Yes No If yes, indicate which one(s) _____

For Secretary-Treasurer's use only:

Date Received: _____ Check number: _____ Amount: _____

Comments: _____