



# 2024 Membership

(Membership Year is January 1 – December 31)

*Please type or print clearly*

Contact Name \_\_\_\_\_

Organization/Firm \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

2024 Idaho AITC Annual Dues (**Organization @ \$150**) \$ \_\_\_\_\_

2024 Idaho AITC Annual Dues (**Individual @ \$50**) \$ \_\_\_\_\_

Additional Donation to Idaho AITC \$ \_\_\_\_\_

**Total Amount Enclosed** \$ \_\_\_\_\_

If paying by check, make payable Idaho AITC and send to: Idaho Ag in the Classroom  
55 SW 5<sup>th</sup> Avenue, Suite 100  
Meridian, ID 83642

Name on Card \_\_\_\_\_

Card No. \_\_\_\_\_

CVV \_\_\_\_\_ Exp. Date \_\_\_\_\_

We thank you for your prompt attention and support of Idaho Ag in the Classroom and its work to educate students about the importance of agriculture in our world.

OFFICE USE	
Date	_____
Ck #	_____
Amount \$	_____
<input type="checkbox"/> GL <input type="checkbox"/> Mem	Seal _____