



ILLINOIS MUNICIPAL BROADBAND COMMUNICATIONS ASSOCIATION

**913 SOUTH SIXTH STREET
SPRINGFIELD, IL 62703**

IMBCA MEMBERSHIP APPLICATION

MUNICIPALITY: _____
(OR AGENCY OR FIRM IF AN ASSOCIATE MEMBERSHIP-NON VOTING)

ADDRESS: _____

_____, _____
(CITY OR VILLAGE) (STATE) (ZIP CODE)

VOTING DESIGNEE: _____
(OR CONTACT PERSON) (FIRST) (LAST)

TITLE: _____

TELEPHONE: _____

FAX: _____

E-MAIL ADDRESS : _____ DATE: _____

.....
ALT. VOTING DESIGNEE: _____
(OR ALT. CONTACT PERSON) (FIRST) (LAST)

TITLE: _____

TELEPHONE: _____

FAX: _____

E-MAIL ADDRESS: _____ DATE: _____

* MEMBERSHIP FEE \$500 PER YR PAYMENT – (CHECK / BILL ME) CIRCLE ONE
(* RENEWAL DUE ON OCT. 1ST EACH YEAR)