2019-2020 MEMBERSHIP APPLICATION & RENEWAL FORM



South Central Kansas Regional Chapter of the International Association of Assessing Officers

Please complete the following and return to:

Sedgwick County Appraiser's Office 271 W 3rd, Ste 501 Wichita, KS 67202-1212 Attn. IAAO Membership

Name:				
Title:				
Jurisdiction/Company:				
Phone Number:		Ext:		
Mailing Address:				
City:	State:		ZipCode:	
Fax #:	E-mail:			
Regular Member: \$20.00 (IAA)	O NATIONAI	L MEMBER)	7	

* We request work information only (personal is optional). Please note this will be published on our website.

Print Form

SHARE THE BENEFITS OF MEMBERSHIP WITH YOUR COLLEAGUES AND ENCOURAGE THEM TO JOIN!