



Idaho Automobile Dealers Association, Inc.
223 W. State Street, Suite A
Boise, ID 83702
Phone: (208) 853-4668 - Fax: (208) 853-6671
www.idahoada.org

IDAHO AUTOMOBILE DEALERS ASSOCIATION
Associate Membership Application
\$750.00 Annual Membership Fee

Company: _____

Products & Services Offered: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Physical Location (if different): _____

City: _____ State: _____ Zip: _____

Local Number: _____ Fax Number: _____

Toll Free Number: _____ Website: _____

Idaho Representative: _____

E-mail: _____

Additional Contact: _____

E-mail: _____

Additional Contact: _____

E-mail: _____

Authorized Representative (please print): _____

Signature: _____ Date: _____

This membership agreement shall remain in force until thirty (30) days written cancellation notice by either party. Members whose dues are more than ninety (90) days in arrears shall not be considered members in good standing and will not be entitled to privileges of membership. The signature above denotes that this business with stand in accord with the mission statement and code of ethics.

- Business Type: Limited Liability Corp. (LLC)
 Private Corp.
 Sole Proprietorship
 Sub-Chapter S-Corp.

- Partnership
 Public Corp.
 Sub-Chapter C-Corp.

Please mail application along with a check payable to: IADA 223 W. State St., Ste. A, Boise, ID 83702
-or- complete the following Credit Card information and fax to IADA (208) 853-6671 Attn: Membership

Credit Card #: _____ Expiration Date: _____

Name on Card: _____

MEMBERSHIP DOESN'T COST ... IT PAYS.