



AIRA Membership Renewal Form

221 Stewart Ave, Ste 207 • Medford OR 97501
Ph: 541.858.1655 • www.aira.org

Member Info: Are you CIRA?

Last Name:	First Name:
Email Address:	Confirm Email:
Firm Name:	Position:
Firm Address:	
City:	State:
Postal Code:	Country:
Business Phone:	Alt. Phone:
FAX:	Alt. Email:

Membership:

\$225 Regular \$75 Gov./Education \$300 CIRA Other (*explain*):

Payment:

Amex Visa MasterCard Discover Check

Card Number:	Exp. Date
Name on Card:	Billing Zip Code:

Comments or Special Instructions:

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Mail completed form to:

AIRA
221 Stewart Avenue, Suite 207
Medford OR 97501

Or FAX to:

541.858.9187
ATTN: Bryan Anderson

Questions? Call the AIRA office at: 541.858.1665