

Please enroll me as an Arizona Industrial Relations Association member

Name: _____

Position Title: _____ Organization: _____

Directory and Mailing Address: _____ City/State/Zip: _____

Telephone: _____ e-mail: _____

Profession (Please check) : Academic/Facility Arbitration/Mediation/Neutral Legal
 Management Affiliation Union Affiliation Student
 Other _____
Describe

Fees: Regular \$35.00
Full-time student \$5.00

**Please make checks payable to
Arizona Industrial Relations Association and mail to:**

Vera Ann Riggs, Secretary-Treasurer
c/o Salt River Project PAB261
P.O. Box 52025
Phoenix, AZ 85072-2025
Phone: (602) 236-3009
E-Mail: variggs@srpnet.com