# International Organic Inspectors Association

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# SUPPORTING MEMBERSHIP APPLICATION

*Choose Membership Level:* Individual - $145/year [ ] Business/organization - $210/year [ ]  Certification Agency - $520/year [ ] Patron - $1000/year [ ]  Sustainer ($5000/year [ ]

*Please print or fill out on your computer. Information from this form may be used in the IOIA Annual Membership Directory. Please read the I[OIA Code of Ethics and Code of Conduct.](http://www.ioia.net/ethics.html)*

Name Click here to enter text. Organization/business Click here to enter text.

## Address Click here to enter text. City Click here to enter text. State/Province Click here to enter text. Country Click here to enter text.Zip/Postal Code Click here to enter text.Telephone Click here to enter text.Fax Click here to enter text. Email Click here to enter text.

*For Supporting Individual/Business/Organization/Patron Membership Levels.*

***Certification agencies should fill out the other side of this application.****If you are an individual representing a regional certification agency, please fill out the Certification Agency section also.*

1. Write a brief statement about your interests/business/organization for the Membership Directory. Click here to enter text.
2. Type of business or organization Click here to enter text.
3. List organic products and/or services Click here to enter text.
4. Briefly explain your interest in being a supporting member of IOIA Click here to enter text.
5. How can IOIA help you? Click here to enter text.

***Certification Agency Membership Level.*** *Please attach supporting information (organic standards, inspection manual/policies).*

1. Inspection Coordinator and how to contact (if different from above) Click here to enter text.
2. What geographic areas does your certification program cover? Click here to enter text.
3. Is your certification program IFOAM accredited? Yes [ ]  No [ ]
4. Is your certification program accredited by any other organization/governmental body?

Yes [ ]  No [ ]  If yes, the name is Click here to enter text.

1. Approximately how many farms/livestock operations are currently certified by your program? Click here to enter text.
2. Approximately how many processing operations are currently certified by your program? Click here to enter text.
3. Are your inspectors employees or independent contractors? Click here to enter text.
4. Do you provide inspector training? Yes [ ]  No[ ] If yes, please describe Click here to enter text.
5. How would a potential inspector be hired by your agency? Click here to enter text.
6. Briefly explain your interest in being a supporting member of IOIA Click here to enter text.

## Enclosed is my check, payable to IOIA, in the amount of $Click here to enter text..

I hereby attest that all the above and attached information is true and accurate. I support IOIA’s Mission Statement and agree to follow IOIA’s Code of Ethics and Code of Conduct. In the event of a dispute, the venue for resolution will be in Montana.

## Signature Click here to enter text. Date Click here to enter text.

Please make check/money order for US funds payable to
International Organic Inspectors Association (IOIA)
and send to: IOIA, P.O. Box 6, Broadus, Montana, USA 59317

## THANK YOU FOR YOUR SUPPORT!