



**INDIANA ASSOCIATION OF  
PREVENTION PROFESSIONALS, INC.  
MEMBERSHIP RENEWAL NOTICE**

To renew your membership for IAPP, please update the information on the form below. The form and a personal check for \$50.00 membership renewal fee should be sent in by January 31. **A late fee of 25.00 may apply to renewals sent in after the deadline.**

For additional information or questions, please feel free to contact Jami Schroeder via phone at 812-232-5190 or [IAPP@cfiy.org](mailto:IAPP@cfiy.org)

Thank you for your interest in IAPP.

Please retain top portion for your records.

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Indiana Association of Prevention Professionals, Inc.  
Membership Renewal

**\*MEMBERSHIP FEE MUST ACCOMPANY FORM**

Please check box if your information has changed

Name: \_\_\_\_\_ Member #: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

E-Mail address: \_\_\_\_\_

Select Program: SIG ROCK DFC LCC Other: \_\_\_\_\_

Please return to: IAPP  
Jami Schroeder  
Booker T. Washington Community Center  
1101 S. 13<sup>th</sup> Street  
Terre Haute, IN 47802