



NWGIA

2019 NORTHWEST GEORGIA INSPECTOR ASSOCIATION

DATE: _____

JURISDICTION/ORGANIZATION: _____

NAME: _____

TITLE/POSITION: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP _____

TELEPHONE: _____ FAX: _____ CELL: _____

EMAIL: _____

TYPE OF MEMBERSHIP

_____ ACTIVE - \$35.00

_____ ASSOCIATE - \$50.00

_____ PROFESSIONAL - \$75.00

_____ RETIRED - \$35.00

Are you currently a member of BOAG? _____ YES _____ NO

Are you currently a member of any other Organization or Board? _____ YES _____ NO

Please List if yes: _____

Please list all certifications:

Please mail payment to: NWGIA
P.O. Box 2197
Kennesaw, Georgia 30156