

# International Association for Identification

## Missouri Division

### New Membership Application



Application Type \_\_\_\_\_ Date

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Title \_\_\_\_\_

Agency/Business Name \_\_\_\_\_ Unit/Division \_\_\_\_\_

Street Address \_\_\_\_\_ Apt./Unit \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone # \_\_\_\_\_ Ext. \_\_\_\_\_ Work \_\_\_\_\_ Preferred E-mail Address \_\_\_\_\_  
Home \_\_\_\_\_

Have you ever been convicted of a crime? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

Membership Type	Active _____	Are you a member of the IAI parent body?	Yes _____	IAI Member #
	Associate _____		No _____	

State Your Qualifications (see "Qualifications" below):

Recommended By: \_\_\_\_\_ MOIAI Member # \_\_\_\_\_

Payment Type \_\_\_\_\_ Check (payable to "MOIAI") \_\_\_\_\_ Credit Card (via Square) \_\_\_\_\_

I hereby make application for membership in the Missouri Division of the International Association for Identification, in accordance with its Constitution and By-Laws, and agree to be bound therewith.

Signature \_\_\_\_\_

**All fields in red are required fields.**

## Qualifications

### **Active Membership**

The Active membership of the Division shall consist of heads of Bureau of Identification (including persons under their supervision) who are engaged in the science of identification, heads of police departments, chiefs of police, chiefs of detectives and sheriffs; provided however the forgoing bona-fide employees of, and received salaried from a national, state, county, or municipal government, or some subdivision thereof, of who are active members of the parent body.

### **Honorary Associate Membership**

The Associate membership shall be open to all reputable person, wholly or partially engaged in any of the various phases of the science of identification, who are not qualified for Active membership. Such members shall in all respects be subject to the same rules, fees, and charges as Active members and shall be entitled to the same rights and privileges, except that they shall not be entitled to election as an Officer of the Division.

When applying for Associate membership, the applicant must state the phase of science of identification in which he or she is qualified.

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## Payment Options

### **Mail Checks:**

MOIAI  
P.O. Box 2243  
Cape Girardeau, MO 63702

### **Credit Card Payments:**

Via [Web Store](#) Link (use Chrome or Edge)

If multiple applicants are contained in one transaction, please list applicant names in "note to merchant".

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## Dues

### **Yearly Renewal (\$20)**

**Due Date: March 31**

After due date, you will be removed from active status if dues have not been paid.

### **Life Active Membership**

Once you have paid your dues consecutively for twenty-five (25) years, you will be notified of your transition to "Life Active" status, and will be no longer required to renew your membership yearly.

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## **Questions?**

[missouriiai@gmail.com](mailto:missouriiai@gmail.com)