



## APPLICATION FOR JOINT MEMBERSHIP

Member Name: \_\_\_\_\_  
*PLEASE PRINT*

Account Number(s): \_\_\_\_\_

Additional Members Name: \_\_\_\_\_

Signatures: \_\_\_\_\_  
*MEMBER*

\_\_\_\_\_  
*ADDITIONAL MEMBER*

Date: \_\_\_\_\_

Iliamna • Newhalen • Nondalton Electric Cooperative, Inc.

PO Box 210 Iliamna, AK 99606 Phone: (907) 571-1259 Fax: (907) 571-1752