

**MEMBERS AND ASSOCIATES OF THE
HONORS COUNCIL OF THE ILLINOIS REGION**
HCIR Tax Exempt #37-1321677

Membership Application and Invoice

At the fall 2016 meeting, it was confirmed that the HCIR dues would cover one calendar year. Monies collected are applied towards student research grants, conference expenses for the Spring Student Symposium, and HCIR operational expenses. Institutional dues for each calendar year are due by **January 1**.

_____ We wish to renew membership in the HCIR for calendar year _____. (\$80)

_____ We wish to join the HCIR for calendar year _____. (\$80)

Please provide information for communicating with you and/or your Honors College/Program.

NAME: _____

TITLE: _____

INSTITUTION: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____

DATE: _____

Make checks payable to: **Honors Council of the Illinois Region**

Mail to: Lisa Hedrick
University of St. Francis
500 Wilcox St.
Joliet, IL 60435

Thank you!