

Iowa Commercial Nutrient Applicators Association

900 Des Moines Street . Des Moines, Iowa 50309
800/383-1682 . 515/262-8323 . FAX 515/262-8960

Current Issues/Programs

- 2011 North American Manure Expo to be held in Norfolk, Nebraska
- July 20, 2011
- ICNAA Annual Meeting & Training Conference to be held in conjunction with the 2011 Agribusiness Showcase & Conference
- H2S safety monitoring while agitating deep pits
- Pre-sampling protocols and understanding the nutrient profile of foaming vs. non-foaming pits
- Partnering with other livestock industries in dealing with common concerns
- Working with the Iowa Department of Natural Resources to potentially craft a multi-year certification program

Join Today!

Voting Commercial Applicator: \$100

Must be a commercial manure applicator business owner/manager with a valid Iowa commercial manure applicator's license.

Confinement Site Applicator: \$50

Must be a certified confinement site applicator business owner/manager with a valid Iowa confinement site applicator's license. Does not have voting privileges.

Service Provider: \$125

Members are persons or businesses that have an active interest in the business supporting commercial nutrient applications and wish to encourage and financially support the goals of ICNAA. These members may include, but are not limited to: manure plan insurance carriers, laboratories, certified crop advisers, coop agronomists, lawyers, engineers, suppliers and equipment manufacturers/dealers. Does not have voting privileges.

Associate: \$25

Members are employees of academic institutions, state agencies, government employees, conservation districts employees, local county officials or commodity group associations. Does not have voting privileges. Also includes special circumstances as determined by the Board.

Employee of: \$50

Works for a company that holds a full membership and will receive discount registrations among many member privileges. Does not have voting privileges.

Contact Name _____

Company _____

Address _____

City/State/Zip _____

Phone _____

Fax _____

E-mail _____