

IGRA: New Contestant Set up Request

The following information is needed to set up your IGRA Number to allow access to the on-line registration system.

IGRA Member Association:
(This is the association you are competing under)

Date of Birth:

Social Security Number/SIN (Canadian's): XXX-XX- (Only the last four digits)

Full Legal Name:

Performance Name (Alias, if Any)
(If you use an alias, it will appear on-line otherwise your first name and last initial will appear on-line)

Sex:

Address:

City:

State/Province: **Zip Code/Postal Code:**

E-mail Address:

Home Phone Number:

Cell Phone Number:

Complete this form and e-mail to: admin.assistant@igra.com or treasurer@igra.com

*****This form will be shredded after entered into the IGRA Database*****