



## Indiana Pest Management Association Annual Dues Form

### Membership Dues for IPMA ONLY - July 1, 2021 - June 30, 2022

*Use this form for IPMA and Allied dues only - For Joint Dues, Use NPMA form*

Dues for State Membership ONLY	\$	75
IPMA Scholarship Contribution (OPTIONAL)	\$	_____
TOTAL:	\$	_____

*Make your check payable to:*

**INDIANA PEST MANAGEMENT ASSOCIATION, INC.**

Mail to: Indiana Pest Management Association  
P.O. Box 3926  
West Lafayette, IN 47996

Company Name: \_\_\_\_\_

Member Name: \_\_\_\_\_

Company Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Company Website Address: \_\_\_\_\_

*Note: Information provided here will be used to update our records*

**To pay by credit card, provide the information requested below:**

Name on Card: \_\_\_\_\_

Card #: \_\_\_\_\_

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

Billing Address: \_\_\_\_\_

*must match the address associated with this credit card*

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Signature: \_\_\_\_\_