



# Indiana Pest Management Association

## MEMBERSHIP DUES INVOICE FOR IPMA/NPMA JOINT MEMBERSHIP FOR JULY 1, 2019 - JUNE 30, 2020

### Joint Membership Dues Breakdown:

A	\$0 - 200,000	\$115.50	\$75	\$190.50
B	\$200,001 - 500,000	\$189	\$75	\$264.00
C	\$500,001 - 1,000,000	\$493.50	\$75	\$568.50
D	\$1,000,001 - 2,500,000	\$750.75	\$75	\$825.75
E	\$2,500,001 - 5,000,000	\$1,270.50	\$75	\$1,345.50
F	\$5,000,001 - 10,000,000	\$3,176.25	\$75	\$3,251.25
G	\$10,000,001 - 15,000,000	\$4,908.75	\$75	\$4,983.75
H	\$15,000,001 - 25,000,000	\$6,641.25	\$75	\$6,716.25
I	\$25,000,001 - 50,000,000	\$12,127.50	\$75	\$12,202.50
J	\$50,000,000 - \$100,000,000	\$24,255.50	\$75	\$24,330.00
K	Over \$100,000,000	\$36,750.00	\$75	\$36,825.00

### Joint Membership Dues Amount for 2019-2020

(See Total Dues Owed column above) \$ \_\_\_\_\_  
 Dues for those choosing State Membership only (\$75) \$ \_\_\_\_\_  
 IPMA Scholarship Contribution (Add to your check or credit charge) \$ \_\_\_\_\_  
 TOTAL \$ \_\_\_\_\_

Make your check payable to: INDIANA PEST MANAGEMENT ASSOCIATION, INC.

Mail to:

PLEASE PRINT

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

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

Member's Name \_\_\_\_\_ Spouse's Name \_\_\_\_\_

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

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

Phone Number \_\_\_\_\_ FAX Number \_\_\_\_\_

Email Address \_\_\_\_\_ Web Address \_\_\_\_\_

Credit Card Payment:  Visa  Mastercard

Name on Card \_\_\_\_\_ Expiration Date \_\_\_\_\_ Card# \_\_\_\_\_

Billing Address: City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
(if different than above)

Signature \_\_\_\_\_