

Florida Pest Management Association ASSOCIATE (Certified Operator) Membership Application

Please print or type

Today's Date _____

Name _____ Nickname _____

Address _____

City _____ State _____ Zip + 4 _____

County _____ Phone _____ Fax _____ E-Mail _____

Website: _____

Disaster preparedness information so that we will be able to rapidly contact you in time of crisis, please provide:

Home Address _____

City _____ State _____ Zip + 4 _____

Home Phone (_____) _____

ASSOCIATE MEMBER: A certified operator who is duly licensed under Chapter 482 F.S. Associate Members have no voting privileges nor may they hold office. An Associate Member may serve on groups or committees and has the right to attend meetings, convention, conferences or any social or educational event which may be sponsored by the Florida Pest Management Association. **Licensed companies are not eligible for Associate Membership.**

COMMUNICATIONS AGREEMENT:

I understand that by providing my mailing address, e-mail, telephone number, and fax number, I consent to receive communications via regular mail, e-mail, telephone, and/or fax sent by or on behalf of FPMA.

I would like to join other Florida Pest Management Association professionals and I agree to adhere to the Association's Code of Ethics. I understand that membership is not effective until official notification.

Signature _____

Referred By:		
Name _____		
Company _____		
Address _____		
City _____	State _____	Zip _____

DUES SCHEDULE

ASSOCIATE MEMBERSHIP.....\$149.00

TOTAL ASSOCIATE DUES.....\$_____

INDICATE PAYMENT METHOD

Please check one:

- Check Master Card Visa
 American Express Discover

Card No. _____ Exp. Date _____

CSV# (3 digits on back of card) _____

Authorized Signature _____

Billing Addr. For Credit Card: Same as Above or :

Dues to FPMA are not deductible as a charitable contribution but may be deductible as an ordinary and necessary business expense. A portion of dues, however, is not deductible as an ordinary and necessary business expense to the extent that FPMA engages in lobbying. The non-deductible portion of dues for 2009 is 12%.



RETURN APPLICATION WITH PAYMENT TO FPMA:
 FLORIDA PEST MANAGEMENT ASSOCIATION
 6882 Edgewater Commerce Parkway
 Orlando, FL 32810-4281
 Phone: (800) 426-4829 Fax: (407) 292-0918 Website: www.flpma.org

Valid Through: 12-31-09