Mid-Florida Chapter NIGP

"Taking NIGP by Storm!"

NIGP Small Chapter of the Year 2007 & 2009

Membership Application / Dues Invoice
2010

Please complete the following information (type or print).

Name: _____
First Middle Initial Last

Title: _____

Certifications: Check all that apply. Include the month and year certification was received.

☐ CPPO _____ ☐ CPPB_____ ☐ C.P.M _____ ☐Other_____

Entity: _____

Mailing Address: _____

City, State, Zip: _____

Telephone: (_____) _____ Fax: (_____) _____

E-Mail Address: _____

Birthday (Month & Day): _____

☐ Renewal ☐ New Member

Dues are $30.00/member for the calendar year (January 1-December 31, 2010)

Dues in the amount of $_____ paid by check #_____

Dues paid by Volunteer Hours:_____# of hours _____Verified & Attached

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Please fill in this form completely and return to the address below with your check payable to:
"**Mid-Florida Chapter of NIGP**"

Mid-Florida Chapter of NIGP
Attn: Rhonda Simmons, CPPB
Membership Chair
PO Box 234
Bartow, FL 33831

New members may join throughout the year