



Mid-Florida Chapter NIGP

"Taking NIGP by Storm!"

NIGP Small Chapter of the Year 2007, 2009 & 2011

Membership Application / Dues Invoice 2012

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 & Date): _____

Renewal New Member

Dues are \$30.00/member for the calendar year (January 1-December 31, 2012)

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

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

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: Mary W. Combee, CPPB, CPCP, FCCM
Membership Chair
PO Box 234
Bartow, FL 33831

New members may join throughout the year

