



MEMBERSHIP APPLICATION
Arkansas
For NPMA and APMA Joint Membership
for July 1, 2009 through June 30, 2010



Firm: _____
Contact/Title: _____
Mailing Address: _____
Street Address: _____
City/State/Zip: _____
Phone: _____ **Fax:** _____ **Co E-Mail** _____
Ind Email _____ **Website** _____
License No. _____

NPMA DUES:

Please choose your annual sales volume and enter amount on **TOTAL DUES** line

Dues Class	Annual Sales Volume	NPMA Dues	APMA Dues	TOTAL Dues
A	\$0-200,000	\$110	\$125	\$235
B	\$200,001-500,000	\$180	\$125	\$305
C	\$500,001-1,000,000	\$470	\$125	\$595
D	\$1,000,001-2,500,000	\$715	\$125	\$840
E	\$2,500,001-5,000,000	\$1,210	\$125	\$1,335
F	\$5,000,001-10,000,000	\$3,025	\$125	\$4,485
G	\$10,000,001-15,000,000	\$4,675	\$125	\$4,800
H	\$15,000,001-25,000,000	\$6,325	\$125	\$6,450
I	\$25,000,001-50,000,000	\$11,550	\$125	\$11,675
J	Over \$50,000,000	\$23,100	\$125	\$23,225

TOTAL DUES: _____ \$ _____

Please enclose the application with proper remittance to:

Arkansas Pest Management Association
PO Box 26243
Little Rock, AR 72221
Email: anne@bestmanagement.net

For questions or concerns about your joint membership
please contact Anne Fuller at APMA at 501-224-4840
or Jean Neun at NPMA at 703-352-6762

Our websites are www.arkansaspest.org
and www.npmapestworld.org

Thank you for your support!