



APPLICATION for MEMBERSHIP

INTERNATIONAL ASSOCIATION OF PLUMBING AND MECHANICAL OFFICIALS

Check the Class of Membership for Which You are Applying.

- 1. Governmental Unit (By Population of Government Unit)
 - 1 to 25,000 (Level 1) \$ 150.00
 - 25,001 to 50,000 (Level 2) 200.00
 - 50,001 to 300,00 (Level 3) 250.00
 - Over 300,000 (Level 4) 300.00
- 2. Individual 75.00
- 3. Senior* 15.00
- 4. Organization 425.00
- 5. Student/Apprentice** 25.00
- 6. International*** \$50.00
- 7. Introductory**** \$0

* To qualify for a senior membership, applicants must be 62 years of age or older.
 ** If you're applying for a student membership, please include a copy of your student ID card, recent transcript, or enrollment.
 *** Outside U.S. and Canada – membership materials in electronic format only
 **** Complimentary – 12 consecutive months only and membership materials in electronic format only

Please Print or Type (Must complete all fields)

First Name: _____
 Last Name: _____
 Date of Birth: ____ / ____ / ____
 Company Name (optional): _____
 Title/Position: _____
 Billing Address: _____
 City: _____ State: _____ Zip+4: _____
 Daytime Phone: _____ Fax. No.: _____
 E-mail: _____
 How did you hear about IAPMO? _____
 Mailing/Shipping address (if different from above)
 Mailing Address: _____
 City: _____ State: _____ Zip+4: _____

Please check the applicable boxes in both the Professional and Specialty Fields

Professional Fields:

- | | | |
|---|---|--|
| <input type="checkbox"/> Backflow/Cross Connection Prevention | <input type="checkbox"/> Hydronics | <input type="checkbox"/> Retired |
| <input type="checkbox"/> Bookstore | <input type="checkbox"/> Mechanical | <input type="checkbox"/> Water Filtration |
| <input type="checkbox"/> Drain & Sewer | <input type="checkbox"/> Plumbing | <input type="checkbox"/> Water Heating Equipment |
| <input type="checkbox"/> Fire Sprinkler | <input type="checkbox"/> Professional | <input type="checkbox"/> Welding |
| <input type="checkbox"/> Gas | <input type="checkbox"/> Refrigeration | <input type="checkbox"/> Other (Specify) _____ |
| <input type="checkbox"/> HVAC/R | <input type="checkbox"/> Research & Testing | |

Specialty Fields:

- | | |
|--|---|
| <input type="checkbox"/> Apprentice | <input type="checkbox"/> Marketing (sales) |
| <input type="checkbox"/> Architect | <input type="checkbox"/> Plans Examiner |
| <input type="checkbox"/> Building Official | <input type="checkbox"/> Plumbing/Mechanical Engineer |
| <input type="checkbox"/> Commercial, Industrial or Institutional | <input type="checkbox"/> Professional Engineer |
| <input type="checkbox"/> Contractor | <input type="checkbox"/> Public Service (commissioner, government agency) |
| <input type="checkbox"/> Educator (instructor, professor) | <input type="checkbox"/> Remodeling |
| <input type="checkbox"/> Estimator | <input type="checkbox"/> Residential Construction |
| <input type="checkbox"/> Inspector | <input type="checkbox"/> Service & Repair |
| <input type="checkbox"/> Journeyman (installer) | <input type="checkbox"/> Sheet Metal |
| <input type="checkbox"/> Legal | <input type="checkbox"/> Student |
| <input type="checkbox"/> Manufacturer | <input type="checkbox"/> Supplier (wholesaler-dealer) |
| <input type="checkbox"/> Other (Specify) _____ | |

Signature: _____ Date: _____

Method of Payment (Please complete)⁺⁺

- | | |
|--|---|
| <input type="checkbox"/> Check | <input type="checkbox"/> American Express |
| <input type="checkbox"/> Money Order | <input type="checkbox"/> Invoice Me |
| <input type="checkbox"/> Visa | <input type="checkbox"/> Online |
| <input type="checkbox"/> Master Card (www.iapmomembership.org) | |

Credit Card No: _____

Exp. date: _____ CVC Number: _____

The CVC number is the last 3 digits located on the back of Master Card and Visa. American Express cards, the CVC number is a printed (NOT embossed) group of four digits on the front towards the right.

Signature as shown on Credit Card: _____

Date: _____

Please make checks payable to:

IAPMO
 4755 East Philadelphia Street
 Ontario, California 91761-2816
 909-472-4109 Fax: 909-472-4157
 Email: memberservices@iapmo.org

⁺⁺ Not required for Introductory Membership

Additional Information

How would you like to receive the OFFICIAL Magazine?

- Print (Not available for International or Introductory membership)
- Online

How would you like to receive your Membership Renewal Invoice Notification?

- via Email
- via US Mail (Not available for International or Introductory membership)

IAPMO's Green initiative is to go paper-free by providing the Proposed Monographs, Annual Report on Proposals and Comments in digital Adobe PDF format at
<http://www.iapmo.org/Pages/DownloadCenter.aspx>

To request a printed copy please download a request form at
<http://www.iapmo.org/pages/default.aspx> or
 contact Alma Ramos at 909-230-5528.

Jurisdictions and Organizations Must Submit a Letter That Designates Their Voting Representative.