



MINNESOTA MEMBERSHIP FORM

NPMA and MPMA Joint Membership January 1, 2024 - December 31, 2024

Join online at: www.npmapestworld.org/join Renew online at: www.npmapestworld.org/renew

You may fax or mail this form with payment to: National Pest Management Association, 10460 North Street, Fairfax, VA 22030, FAX: 703-352-3031

FIRM			LICENSE NO	LICENSE NO				
CONTACT NAME	TITLE							
STREET ADDRESS			CITY	CITY				
PHONE E-MAIL				WEBSITE				
ANNUAL REVENUE # OF EMPLOYEES				YEARS IN BUSINESS				
Please select your dues class	s in Table A and Table B t	o determine y	our total membership am	ount due.				
TABLE A: MPMA	TABLE B: NPMA DUES							
MPMA DUES		DUES CLASS	ANNUAL SALES VOLUME	NPMA DUES	DUES CLASS	ANNUAL SALES VOLUME	NPMA DUES	
Company dues	\$100	A	\$0 – 499,999	\$195	□ N	\$4.5M – 4.9M	\$2,170	
		В	\$500,000 - 599,999	\$395	_ o	\$5M – 5.9M	\$2,365	
+ Individual MN Licenses	v. #40	□ c	\$600,000 - 699,999	\$475	☐ P	\$6M - 6.9M	\$2,760	
for the previous year:	x \$18	□ D	\$700,000 – 799,999	\$555	□ Q	\$7M – 7.9M	\$3,150	
MPMA DUES	\$	□ E	\$800,000 - 899,999	\$630	□ R	\$8M – 8.9M	\$3,545	
		☐ F	\$900,000 - 999,999	\$710	□ s	\$9M – 9.9M	\$3,940	
		□ G	\$1M - 1.49M	\$790	□ т	\$10M - 10.9M	\$4,335	
		□ H	\$1.5M – 1.9M	\$985	□ U	\$11M – 11.9M	\$4,725	
		_ I	\$2M - 2.49M	\$1,185	□ v	\$12M – 12.9M	\$5,120	
		□ J	\$2.5M - 2.9M	\$1,385	□ w	\$13M – 13.9M	\$5,515	
		□ K	\$3M - 3.49M	\$1,575	□ x	\$14M – 14.9M	\$5,910	
		□ L	\$3.5M – 3.9M	\$1,775	Y	\$15M – 19.9M	\$6,300	
		M	\$4M - 4.49M	\$1,970	Over \$20M	Over \$20M – Call NPMA		
PAYMENT INFORMATION:								
			☐ PLEASE BILL M	☐ PLEASE BILL MY ☐ VISA ☐ MASTER CARD ☐ AMEX				
TABLE A: MPMA DUES \$			CARD NUMBER	CARD NUMBER				
+ TABLE B: NPMA DUES \$			EXPIRATION DATE	EXPIRATION DATE SECURITY CODE				
TOTAL AMOUNT DUE \$				CARDHOLDER NAME				
			SIGNATURE	SIGNATURE				
MPMA Membership Pledge: If elected to membership, I agree to comply with the Code of Ethics and other policies of the Minnesota Pest Management Association. I understand that membership does not become effective until this application is accepted by the Board of Directors of the Association.								
SIGNATURE			TITLE	TITLE DATE				

THANK YOU FOR YOUR SUPPORT!