

FLORIDA INDUSTRIAL PRETREATMENT ASSOCIATION, Inc.

MEMBERSHIP APPLICATION (JAN-DEC 2025)

Please fill out the following information completely. The information provided is held in confidence and will not be provided for mailing lists to anyone other than the FIPA. Please print or type.

To pay online go to www.fipaonline.com or enclose a check or money order for \$30 payable to the Florida Industrial Pretreatment Association, Inc. and mail to:

Florida Industrial Pretreatment Association, Inc.
P.O. Box 1872
Windermere, FL 34786-1872
secretary@fipaonline.com

TYPE OF MEMBERSHIP (check one) _____ Regulatory _____ Industrial _____ Corporate

(**Regulatory** members shall consist of any municipal pretreatment program personnel or wastewater representatives or municipal laboratory personnel. Also included are members of government agencies that are engaged in pretreatment activities. **Industrial** members are those who are responsible for operating or administering pretreatment equipment located in private or public industries with no vested interest in promoting sales, and/or services in pretreatment products or services. **Corporate** members shall consist of individual personnel from engineering firms, consultants, vendors, equipment suppliers, private laboratories and any other person interested in the objectives of the FIPA.)

“Only **Regulatory** members are allowed to vote”

Mr. Mrs. Ms. _____
(circle one) Last _____ First _____ MI _____

Job Title _____

Company _____

Preferred Mailing Address _____

City _____ State _____ Zip Code _____

Telephone (____) _____ ext. _____ E-mail _____

AGREEMENT

I certify that my statements are correct and agree that I will be governed by the Articles and By-Laws and Policies of the Association, and will conform to the FIPA Code of Ethics

Signature _____ Date _____

For Official Use Date Entered _____ Membership # _____ Init. _____