

IFEDCA

Membership Application



International Forensic Entomology
Detection Canine Association



1913 Hooper Ave, Toms River, NJ 08753
PHONE: 732-255-1649 FAX: 732-255-1539

Application for Membership. Any corporation or other business entity eligible for active or associate membership in the Association may submit an application for membership to an office of the Association. Such application shall be made on a form approved by the Board of Directors of the Association. Membership dues will be billed annually and due upon receipt of invoice, unless a written resignation has been received within 30 days of renewal.

Company Name: _____
Company Type: _____
Contact Name: _____
Title: _____
Address: _____
City: _____
State: _____
Zip Code: _____
Phone: _____
Fax: _____
Email: _____
Website: _____

Company Description: _____

Choose Your Level of Participation.

Fee Schedule (Annual Dues):

_____ Charter Member	\$1,000
<small>(Available for a limited Time Only. This is a Three Year Membership, Renewal at Regular Active Member Rate.)</small>	
_____ Active Member	\$500
_____ Associate Member	\$350

I attest that all information provide is accurate and true. By signing this application, I agree to abide by the standards set forth and the Bylaws of the association.

Name: _____
Date: _____



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www.ifedca.com