National Association of Plant Protection & Quarantine Managers
Membership Application Record

Name: ___________________________________________ Date: __________________

Mailing Address:
___________________________________________________
___________________________________________________
___________________________________________________

Email Address: ____________________________________ Phone: __________________

Working Title: ______________________ Series/Grade: _______________

Present Duty Station: ________________________________

Name of person that recruited you or referred you to NAPPM: ________________________________

Payment Method (check one):  □ Cash (Check enclosed for $260.00)
□ Payroll Deduction (Attach SF-1187)
Retiree Member Option Only:  □ Cash (Check enclosed for $26.00)

Return this application with check or SF-1187 to the VP for your area:

Lisa Kohl  Ryan Vazquez  Bruce Shambaugh
NAPQQM HQ/IS/Retiree VP  NAPQQM ER VP  NAPQQM WR VP
USDA, APHIS, PPQ  USDA, APHIS, PPQ  USDA, APHIS, PPQ
4700 River Rd.  151 W. Boylston Dr., Suite 204  5353 Yellowstone Rd
Riverdale, MD 20737  Worcester, MA 01606  Cheyenne, WY 82009

Annual dues are payable by check in advance on January 1 or by payroll deduction. Make your check payable to: National Association of Plant Protection & Quarantine Managers. Payroll deduction is at the rate of $10.00 per pay period. You may not use government postage to mail your application.

http://nappqm.org