



# OPCA/ NPMA MEMBERSHIP

PO Box 6954, Edmond, Ok 73083-6954 (405)726-8773 (855)813-7378

Company Name: \_\_\_\_\_ Oklahoma License # \_\_\_\_\_

Company Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ State & zip \_\_\_\_\_

Certified Applicant: \_\_\_\_\_ CA # \_\_\_\_\_

Business #: \_\_\_\_\_ Mobile #: \_\_\_\_\_

Fax #: \_\_\_\_\_

Certified Categories: \_\_\_\_\_ CA# \_\_\_\_\_

The Association subscribes to the [Code of Ethics of the National Pest Management \(NPMA\)](#), which is adopted as a part of the by-laws of the Oklahoma Pest Control Association (OPCA), and is as follows:

**Relation of Members to the public:** The member in their advertising or other solicitations of business, shall not use fraudulent, misleading wording or methods.

**Relation of member to client:** The member shall thoroughly analyze the requirements of their clients and shall conscientiously recommend methods and means to fulfill the potential clients needs.

**Professional Services:** the member upon accepting a contract or service agreement shall render skilled, intelligent and conscientious service.

**Relation of Member to Competitor:** the member shall not publicly criticize the business or private affairs of a fellow competitor.

**Relation of Member to Association:** The member shall be loyal to the principals of their Associations and active in it s advancement.

REVENUE BOX	ANNUAL REVENUE	NPMA DUES	OPCA DUES	One-time FEE	TOTAL
	\$1.00 - \$200,000	\$110.	\$90.	\$25	\$225.
	\$200,001-\$500,000	\$180.	\$90.	\$25	\$295.
	\$500,001-\$1,000,000	\$470.	\$90.	\$25	\$585.
	\$1,000,001-OVER	\$715.	\$90	\$25	\$830

**COMPLETING THIS APPLICATION:**  
 OPCA DUES ARE \$90.00 AND THERE IS AN INITIAL ONE-TIME FEE OF \$25.00, TOTALING \$115.00 (BRANCH OFFICES ARE \$25.00 ADDITIONAL PER LOCATION) RENEWALS WILL BE DUE JULY 1 EACH YEAR. USING THE TABLE ABOVE DETERMINE YOUR COMPANY'S ANNUAL REVENUES FOR THE MOST RECENT YEAR. PLACE AN X IN THE APPROPRIATE BOX. THIS INFORMATION WILL BE KEPT IN CONFIDENCE AND WILL NOT BE DISCLOSED TO ANYONE OTHER THAN THOSE HAVING DEALINGS WITH THE ACCOUNTING INFORMATION NECESSARY FOR BILLING PURPOSES. SUBMIT THIS AMOUNT ALONG WITH THIS APPLICATION

I hereby submit this application for active joint membership in th e OPCA & NPMA. If accepted into membership, I agree to comply with the Cod of Ethics and other policies of the Associations. I understand that Joint Membership is **not** optional and dues must be paid for both Associations and that the use of the Associations' seals/logos prior to final membership approval would disqualify my application

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Amount submitted with application: \_\_\_\_\_