International Plastic Modelers' Society/USA
Membership Application / Renewal Form

New ☐ Renewal ☐ IPMS #:

Name: _____

Address: _____

City: _____ State: _____

Zip Code: _____

Phone: _____ E-Mail: _____

Chapter Affiliation, if any: _____

Junior (17 years or younger)		$12.00	_____	Date of Birth: _____
Adult	One year	$25.00	_____	
	Two years	$49.00	_____	
	Three years	$73.00	_____	
Canada & **Mexico**		$30.00	_____	
Foreign	Surface	$32.00	_____	
	Air	$55.00	_____	
Family (1 set of Journals)			_____ ← Adult fee + $5.00	# of cards? _____

Your Signature: _____

If recommended by an IPMS member, please provide his/her:
Name: _____ IPMS #: _____

PAYMENT OPTIONS:

Cash ☐ Amount: _____

Check ☐ Check #: _____ Amount: _____

Credit Card ☐ Master Card ○ _____ Visa ○ _____

Card Number: _____

Exp. Date: _____ / _____

Billing Address, if different than above -

Address: _____

City: _____ State: _____

Zip Code: _____

Applications should be printed and mailed to: IPMS/USA, Dept. H, PO Box 2475, N. Canton, OH 44720-0475