

THE FUNERAL DIRECTORS & MORTICIANS ASSOCIATION OF NEVADA, INC.

GENERAL MEMBERSHIP APPLICATION

(Applicants must complete ALL of the top portion and any other information that pertains to you)

Member Details					
Full Name: First		Middle	Last	Suffix	
Title (Mr. Mrs Miss Rev Dr etc.):	Address:	1 3050	101223		
Date of Birth:					
Home Phone:	Cell Pho	one:	Fax:		
Email Address:	13:00	12 -22 /168	1000	1.5.1	
Emergency Contact:	311	N. B. M.	217 + 623	100	
Primary Duty: Owner	4-14	Manager	Employee		
Licensed Funeral Directo	or	Licensed Embalmer	Licensed Funeral	Arranger	
Licensed Funeral Director's Number: Licensed En			nbalmer's Number:		
Licensed Mortician's Number:		CFSP Certification Number:			
State of Issuance:	A	Are you CPC Certified? Yes: No:			
Company Name:			15 1.45	1.2.2.4	
Company Address:	1000	1 - 1 - 1	St. Second		
City:	State:	71/8:1	Zip:	2112	
Office Phone:	Fax:				
List Memberships in other Funeral Profess	sional Association	is and any Public Offices Held	l:		

Membership is offered under the following conditions:

• General Membership - To become a general member of FDMANV, Inc. you must present this form and payment to the state association in which you serve. (Other National dues may be assessed)

ALL MEMBERS MUST FORWARD A COPY OF THEIR STATE ISSUED FUNERAL SERVICE LICENSES AND A CURRENT PHOTOGRAPH, BEFORE MEMBERSHIP WILL BE APPROVED

The General Membership is \$500.00, payable to The Funeral Directors & Morticians Association of Nevada, Inc. The Non-Traditional Licensed & Unlicensed Membership fee is \$100.00, payable to The Funeral Directors & Morticians Association of Nevada, Inc.

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