

# INTERNATIONAL FORUM OF VISUAL PRACTITIONERS

## IFVP Membership Form

### CONTACT INFORMATION:

Name			
Company			
Address			
City	State	Zip/Postal Code	Country
Email			
Primary Phone	Home	Work	

**MEMBERSHIP INFORMATION (Circle One):**    New member    Renewing IFVP member

**PAYMENT INFORMATION:** I would like to begin/renew my membership for:

- ONE YEAR** membership in IFVP, including my own webpage on the official IFVP website, a discount on attendance at the annual conference, and eligibility for free Associate Membership in Fractured Atlas., at \$150.00 USD
- TWO YEAR** membership in IFVP, including webpage, conference discount, and Fractured Atlas Associate eligibility at \$260.00 USD
- I would like to make a donation to the IFVP (A 501 (c)(6) not for profit Business League, registered with the State of California, USA)
- TOTAL COST:**

### PAYMENT OPTIONS:

- Pay by Check or Money Order, Send by Mail:** Please send this completed form and a check or money order for complete costs to:

**IFVP, P. O. Box 4192, Washington, PA 15301**

Please make payment to "IFVP." You will receive email confirmation of your registration.

- Pay by Credit Card, Return form by Fax or Email:** Please return this completed form to: **724-228-5888** or [Diana@IFVP.org](mailto:Diana@IFVP.org), or [Becky@IFVP.org](mailto:Becky@IFVP.org) Please do not include your credit card information. You will receive a PayPal invoice for complete costs plus a 3% administrative cost charge via email. After we receive your payment, we will email confirmation of your registration.

Thank you for your membership in the International Forum of Visual Practitioners. You will receive an email confirmation of your membership and information on how to build a Directory page at IFVP.org within two weeks.