

Montana Pharmacy Association
PO Box 1569
Helena, MT 59624

MPA

Phone (406) 449-3843
Fax (406) 442-8018
www.rxmt.org

2012 Associate Member Dues

Name: _____
Company: _____
Address: _____
City/State: _____ Zip: _____
Telephone: _____ Fax Number: _____

Email address _____
(For MPA use only - Not to be given out.)

PLEASE REVIEW AND CORRECT YOUR INFORMATION ABOVE.

Please check one of the following:

- I. Associate Level I \$250.00 _____
(Includes all Membership benefits PLUS your business listed in the Winter CE program)
- II. Associate Level II \$500.00 _____
(Membership benefits PLUS booth at the Winter CE)
- II. Associate Level III \$1000.00 _____
(Membership benefits, booth at the Winter CE PLUS Banner ads on MPA's Web Page - www.rxmt.org)

Amount Due: \$ _____

Please return this form with your check to the MPA office.

Or you can pay your dues online using our new secure online payment system. To access this option go to www.rxmt.org and click the "Join" button.

NOTE: Contributions made to the Association are not deductible as a charitable expense, but may be deducted as a business expense. The Budget Revenue Reconciliation Act of 1993 specifies that any dues revenue utilized by a professional or trade association for lobbying purposes cannot be deducted by the member who paid the dues. MPA calculates that 70% of the dues paid by each member are deductible as an ordinary business expense for federal tax purposes. Please provide a copy of this notice to your tax preparer.

2012 Meeting Date to Include on Your Calendar:

**January 13-15, 2012 – MPA 2012 Winter CE, Buck's T-4 Lodge, Big Sky, MT
May 31-June 3, 2012 - Northwest Pharmacy Convention-Coeur d'Alene, ID**