



Indiana Select

Funeral Directors and Morticians Association

Serving with Dignity, Respect and Integrity

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2024 MEMBERSHIP FORM

AS AN EMBALMER AND/OR FUNERAL DIRECTOR, I PLEDGE TO ADHERE TO THE "CODE OF ETHICS," COOPERATE WITH THE STATE AND NATIONAL ASSOCIATIONS AND ATTEND MEETINGS.

Name (Print) _____ License Number _____

Signature _____

Name of Funeral Home _____

Address (Even If No Funeral Home) _____

City _____ State _____ Zip _____

Phone (____) _____ Fax (____) _____

Email _____

- NATIONAL DUES \$400.00 NFDMA
- STATE DUES \$100.00 ISFDMA
- APPRENTICE DUES \$25.00 ISFDMA

Any payment of dues and forms should be made out & mailed to:

***Indiana Select Funeral Directors & Morticians Association
P.O. Box 29363
Indianapolis, IN 46229***

**P.O. Box 29363 Indianapolis, IN 46229
Indianaselectfuneraldirectors@gmail.com**