AFFIRMATIONS

I, Dr.	(please print) do hereby affirm
that I	have received, read, fully understand, and do agree to
comply	with all of the provisions contained in the APMA Code of
Ethics	and the FPMA Code of Ethics.
Managem year's	r, I understand and agree that if I attend a Science and lent Symposium and I do not follow through and pay that dues, I am liable for payment of the non-member fee for attending said Symposium.
SIGNATU	RE:
DATE: =	
Dleage	return this to FDMA with your application and

Please return this to FPMA with your application and corresponding materials.