

Illinois Plumbing Education Association of Central Illinois

Membership Application 2024-2025

Member Info				
First Name	Last Name			
Address				
Cell Phone	Work Phone			
Email				
Plumbing License #	ŧ			
Membership type		ew Member	Renewal	
Employer Info				
Employer Name				
Address				
Profession	□ Inspector	□ Contractor	Engineer	
	Certified Inspector	Licensed Plumber	Wholesaler / Rep	
	Full Time	Part Time	□ Retired	
Signature	Date			
Enclose \$35.00 Me	embership / Annual	Dues		
Checks should be mad	de payable to: Illinois Pl	lumbing Education Associa	ation of Central Illinois	
Return Membership Form and Dues to: IL Plumbing Education Association (IPEA) PO Box 3292 Bloomington IL 61702-3292		ipea1.org@	Email Membership form to: ipea1.org@gmail.com and Scan QR code to pay	
Membership Valid thr	ru August 31, 2025			