Foam Blowers of Indiana Membership Application

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Print out this page. Follow the instructions on the Information for Joining the Foam Blowers of Indiana Which you can download from the Foam Blowers.com website

Mail your completed form to:

Foam Blowers of Indiana Attn: Michael Barr 12346 Twyckenham Dr Fishers, IN 46037

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Or: Scan your	Application and Attach to an email to: FBITreasurer@foamblowers.com	
Name:		
Name:		
Address:	city:	
State:	Zip Code: Email:	
beverage secure sa members	that I am over 21 years of age. I understand that I am responsible for my consumption of alcoholic is and that I agree to drink responsibly at club-sponsored meetings and events, and that I am to fe transportation to and from club meetings and events. I further understand that other club , guests, club officers and/or meeting hosts are not liable in any way for incidents resulting from vior or my consumption of alcoholic beverages at or travel to or from club-sponsored meetings and	
Signed:	Date:	
Signed:	Date: All members MUST read and sign this statement	
	a signed form rather than an online signup since we're dealing with alcohol. Thanks for understanding. hip Dues are: \$25.00 for each membership. Or \$30.00 for a Family Membership. (1 additional person of age	
•	e paid your Membership dues via PayPal per instructions on the Information for Joining the Foam Blowers page, then provide us with your PayPal transaction number:	
This will as	ssist us connecting your application with the funds received.	

If you have any questions, please contact Michael Barr at FBITreasurer@foamblowers.com or Carl Nelson at FBIDirector@foamblowers.com.