	Delaware Public Purchasing Association, Inc. 2025	
	MEMBERSHIP APPLICATION NICP	cial apter
	January 1, 2025, to December 31, 2025	
Type of Membership Applied For:		
Regular- \$40	Retired (No Fee) Student (No Fee) Honorary (No Fee)	
Please remember to send/	email a copy to deborah.dennis@delaware.gov	
Full Name:		
Job Title:		
Agency Name:		
Agency Mailing Address		
City:	State:Zip	
Telephone Number:	Fax Number:	
E-Mail Address:		
Present Certification : (<i>Check all that apply</i>)	CPPB CPPO NIGP-CPP Other: Please Identify	
Current Chapter Membe	er: YES NO	
Current NIGP Member:	YES NO	
I hereby renew/apply for membership in the Delaware Public Purchasing Association, Inc., and agree that I will be governed by its by-laws, regulations, principles, and standards. (Copy of Bylaws available upon request)		
SIGNA	TURE DATE	
PAYMENT METHODS: - CREDIT CARD: (On-Line) Please go to www.dppa1.org. The payment button is located on the home screen. Email this form and payment confirmation to Deborah Dennis, Treasurer at deborah.dennis@delaware.gov. - CHECK: (US Mail) Please make payable to Delaware Public Purchasing Association, Inc. FEIN #51-0394354 Return this form with payment and mail to:		
Deborah Dennis-DPPA Treasurer Delaware State Police PO Box 430 Dover DE 19903		
	FOR DPPA USE ONLY	
	Amount:Check #:	
memoersnip # Assigned:	Approved By:Date:	7)