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[www.infda.org](http://www.infda.org)

## 2019 FIRM MEMBERSHIP DUES

### Indiana Funeral Directors Association

January 1, 2019 - December 31, 2019

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#### **IFDA Bylaws - ARTICLE II. Membership.**

1. *Membership Qualifications.* Membership in this association shall consist of the following classifications: Establishment membership, Individual Professional membership, Senior membership, Student Intern membership, Honorary membership, and Associate membership.

a. *Establishment Membership.* An entity licensed and operating as a funeral home by the State of Indiana is qualified to apply for and be admitted as an Establishment member. "Entity" as it relates to this class of membership is defined as any corporation, partnership, limited liability company, sole proprietorship, etc., operating, recognized by and otherwise admitted to do business in the State of Indiana; and licensed as a funeral home in the State of Indiana.

For the purposes of participation in association activities and election to an association office, any employee of an Establishment member who holds a valid Indiana funeral director's license shall be considered a member of the association although only one designated representative may vote on behalf of the Establishment. In the event a person, corporation, partnership, limited liability company, sole proprietor, etc., owns, controls, manages, or operates, one or more entities, and in the event it elects to have any entity under its control or management, apply for Establishment membership, the dues for such proposed Establishment member shall be based upon the total number of death certificates obtained in the previous year for all entities under the control, operation, ownership.



**ESTABLISHMENT INFORMATION (Must include ALL locations)**

Firm Name: \_\_\_\_\_ F.H. License #: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ District: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ County: \_\_\_\_\_

E-mail: \_\_\_\_\_ Website: \_\_\_\_\_

Name of Owner: \_\_\_\_\_ Name of Manager: \_\_\_\_\_

Cell phone number of Owner or Manager: \_\_\_\_\_

*(This is for emergency purposes only and will not be given out, printed or sold.)*

**LOCATION LISTING(S)**

**List ALL locations** (Attach separate page if necessary)

Location: \_\_\_\_\_

Licensed person designated as the responsible party: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address \_\_\_\_\_

Should this location receive IFDA mailings?  Yes  No

Location: \_\_\_\_\_

Licensed person designated as the responsible party: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address \_\_\_\_\_

Should this location receive IFDA mailings?  Yes  No

Location: \_\_\_\_\_

Licensed person designated as the responsible party: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address \_\_\_\_\_

Should this location receive IFDA mailings?  Yes  No

Location: \_\_\_\_\_

Licensed person designated as the responsible party: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address \_\_\_\_\_

Should this location receive IFDA mailings?  Yes  No

## LICENSEE LISTING(S)

Please list ALL licensees of your funeral home and their funeral director license numbers. If you do not list all of your funeral directors, they will be removed from the database. (Attach separate page if necessary)

Name \_\_\_\_\_ License # \_\_\_\_\_

Email \_\_\_\_\_

I wish to receive the newsletter and mailings at my home address for \$50

Name \_\_\_\_\_ License # \_\_\_\_\_

Email \_\_\_\_\_

I wish to receive the newsletter and mailings at my home address for \$50

Name \_\_\_\_\_ License # \_\_\_\_\_

Email \_\_\_\_\_

I wish to receive the newsletter and mailings at my home address for \$50

Name \_\_\_\_\_ License # \_\_\_\_\_

Email \_\_\_\_\_

I wish to receive the newsletter and mailings at my home address for \$50

Name \_\_\_\_\_ License # \_\_\_\_\_

Email \_\_\_\_\_

I wish to receive the newsletter and mailings at my home address for \$50

Name \_\_\_\_\_ License # \_\_\_\_\_

Email \_\_\_\_\_

I wish to receive the newsletter and mailings at my home address for \$50

Name \_\_\_\_\_ License # \_\_\_\_\_

Email \_\_\_\_\_

I wish to receive the newsletter and mailings at my home address for \$50



### MID-WINTER CONFERENCE

January 22 & 23, 2019  
JW Marriott, Downtown Indianapolis



### IFDA ANNUAL CONVENTION

May 7 - 9, 2019  
Embassy Suites Conference Center – Noblesville



## DUES COMPUTATION

Total number of original death certificates filed for your firm(s) in 2018.  
This amount includes all death certificates of all funeral homes under the same ownership filed in calendar year 2018.

Total number of death certificates filed in 2018 \_\_\_\_\_

- |   |                         |    |        |
|---|-------------------------|----|--------|
| 1. Establishment Base Fee   |                         | \$ | 235.00 |
| 2. \$5.35 x _____ Death Certificates (must include ALL locations)<br>(Up to 500 death certificates where services totaled over \$600)   |                         | \$ | _____  |
| 3. \$2.75 x _____ for all death certificates over 500 certificates filed (must include ALL locations)   |                         | \$ | _____  |
| 4. Individual Home Mailing Fee (\$50 each)  |                         | \$ | _____  |
| 5. Voluntary IFDA Legislative Fund Contribution   |                         | \$ | 100.00 |
| 6. Voluntary Indiana Education Foundation Contribution (Tax deductible 501 (c)(3) Foundation)<br><i>All donations go towards the Isaac Ball Fellow designation. A cumulative donation of \$1,000 earns this distinction - OR to become an Isaac Ball immediately, enclose donation of \$1,000</i> |                         | \$ | 100.00 |
| 7. NFDA Music License (please complete enclosed form)   | \$257 x _____ Locations | \$ | _____  |
| 8. NFDA Webcasting License (please complete enclosed form)  | \$ 49 x _____ Locations | \$ | _____  |
| 9. Add \$50.00 for payment postmarked after February 1, 2019  |                         | \$ | _____  |

**TOTAL AMOUNT ENCLOSED** \$ \_\_\_\_\_

## PAYMENT OPTIONS

Check Enclosed (made out to IFDA) Check #: \_\_\_\_\_

Please charge my:  MC  Visa  Amex  Discover

Credit Card Number: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ Security Code (on back of card): \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

One annual payment  Four quarterly Payments (credit card charges only)

*Dues payment to the Indiana Funeral Directors Associations may be deductible as business expenses, but under no circumstances are they deductible as charitable contributions. In accordance with the Budget Revenue Reconciliation Act, 9.24% of 2019 IFDA dues paid by a member will not be deductible as ordinary business expenses for Federal Tax purposes.*

*By paying the 2019 annual dues, I authorize the Indiana Funeral Directors Association, Hightower Services, Inc., and the Indiana Funeral Education Foundation to transmit notices, bulletins, advertisements, and solicitations by fax, email and/or telephone.*

### FOR IFDA OFFICE USE ONLY

	Initials	Date	Check # _____	CC Confirmation # _____
Dues Payment Deposited	_____	_____		
Recorded in computer	_____	_____		
Member Mailing Completed	_____	_____		



# DID YOU KNOW YOU CAN PAY YOUR MUSIC AND WEBCASTING LICENSE FEES THROUGH IFDA?



## Music License

You are eligible for the \$257 "Music License Only" fee if you are a member of at least one of the following associations: NFDA, NFD&MA, OGR, SIFH or an NFDA federated state association (choice or partnership).

The 1984 U.S. Copyright Law requires a music license for all establishments. With NFDA, you pay only \$257 to avoid penalties of up to \$30,000. Don't take that risk. You'll have peace of mind through Dec. 31, 2019 in knowing you're not violating the law.

## Webcasting License

While the music license covers performance, a different license is required for a funeral home to broadcast musical performances over the internet. Funeral homes that offer funeral webcasting services are violating copyright laws when they broadcast over the internet any funeral services that contain copyrighted music.

NFDA has finalized agreements with BMI, ASCAP and SESAC to a webcasting license that enables you to legally broadcast funeral services that include copyrighted music over the internet. With NFDA, you pay only \$49 per website to avoid penalties of up to \$30,000. You'll have peace of mind through Dec. 31, 2019 in knowing you're not violating the law.

## Payment option available on the IFDA dues form.

Locations to be licensed: (To list additional locations, please see back of this form.)

Company _____
Mailing Address _____
Street Address _____
City _____ State _____ Zip _____
Phone _____ Fax _____
Email _____ Website _____

Company _____
Mailing Address _____
Street Address _____
City _____ State _____ Zip _____
Phone _____ Fax _____
Email _____ Website _____

<<< OVER TO LIST MORE LOCATIONS >>>

## MUSIC AND WEBCASTING LICENSING LOCATIONS

Company	_____
Mailing Address	_____
Street Address	_____
City	_____ State _____ Zip _____
Phone	_____ Fax _____
Email	_____ Website _____

Company	_____
Mailing Address	_____
Street Address	_____
City	_____ State _____ Zip _____
Phone	_____ Fax _____
Email	_____ Website _____

Company	_____
Mailing Address	_____
Street Address	_____
City	_____ State _____ Zip _____
Phone	_____ Fax _____
Email	_____ Website _____

Company	_____
Mailing Address	_____
Street Address	_____
City	_____ State _____ Zip _____
Phone	_____ Fax _____
Email	_____ Website _____