



Carolinas SFPE Chapter

2005-2006 Membership Invoice



REGISTRANT INFORMATION:

NAME: _____

COMPANY:* _____ POSITION/TITLE:* _____

MAILING ADDRESS:* _____

PHONE:* _____ FAX:* _____

E-MAIL ADDRESS:* _____

* No changes have been made from 2004-2005 membership registration (check box to indicate "no changes").

PROFILE INFORMATION:

1. Are you a member of the National SFPE? (Please select one): **
 Yes, my current grade is: Member Associate Other Member No.: _____
 No, please e-mail me membership information. No, not currently interested.

2. Professional designations [PE, EIT, NICET, CPCU, CSP, CFPS, EMT, etc.]: _____

3. Are you interested in helping with a Chapter committee or special event? Yes Not at this time.

** Per Chapter & National Bylaws, only National SFPE members (any grade) can be "Chapter Members." Others will be listed as "Chapter Affiliates."

MEMBERSHIP TYPE (Select one):

- INDIVIDUAL MEMBER/AFFILIATE \$25.00
 STANDARD W/PRE-PAID MEETINGS^1 \$250.00
 CORPORATE SPONSOR^2 \$250.00
 CORPORATE SPONSOR W/PRE-PAID MEETINGS^1,2 \$500.00

^1 This membership includes one individual annual membership and payment for the 9 regular monthly meetings in the 2005-06 year.

^2 This membership include one individual membership (i.e. one "member discount" at monthly meetings) and one corporate sponsor website link from the chapter home page through the 2005-06 membership year. (Please include two business cards with your payment).

PAYMENT INFORMATION:

TOTAL ENCLOSED: _____

CHECK NUMBER: _____

Please make checks payable to "Carolinas SFPE"

Mail Registration with payment to:

SFPE Carolinas c/o Matt Hogan
9424 Deer Spring Lane
Charlotte, NC 28210