Albany Society of Engineers

MEMBERSHIP APPLICATION

(Please Print)

NAME _____ _____ _____ " _____ "
First Middle Last Nickname optional

Membership Category: ☐ General ☐ Student

HOME MAILING ADDRESS:

Street:
City/Town: _____ State: _____ Zip:
Phone: _____ Fax: _____ E-mail:

BUSINESS ADDRESS: (Optional)

Firm Name:
Street:
City/Town: _____ State: _____ Zip:
Phone: _____ Fax: _____ E-mail

OCCUPATION:

Job Title:
Work Description:

If retired, under occupation please give former job title and work description.
If student, under business or occupation please list school, field of study, degree expected, and anticipated graduation date.

I hereby apply for membership in the Albany Society of Engineers, and I agree to be governed by the constitution, the bylaws, and the rules of the Society.

Applicant's signature: _____ Date:

Submit this completed form to any Society member or mail it to the following address: Albany Society of Engineers / PO Box 155 / Voorheesville, NY 12186-0155. Please include a $20.00 check for annual dues. Student dues are $10.00. For those joining in July through October, the dues are reduced by one half. If joining in November or December dues paid will be credited to the next calendar year.

Executive Committee Date:
Membership Date: