MEMBERSHIP APPLICATION



100 Mill Plain Road, 3rd Fl.
Danbury, CT 06811 USA
Phone: Toll-free: 800.242.4363 (U.S.) or visit
www.aiche.org/phone (outside U.S.)
to obtain your country's number.
Fax: 203.775.5177

Email: customerservice@aiche.org Web: www.aiche.org/isws

1. PROVIDE APPLICANT INFORMATION I prefer to have my ISWS materials sent to my Home Office _____ Company/Organization ____ City ______ State _____ Postal Code _____ Country _____ Bus. Tel. _____ Fax ____ Fax ____ E-mail ______ Date of Birth _____ / ____ Gender M 2. INDICATE YOUR ACADEMIC TRAINING Name of College or University Date of Degree Degree Major 3. MEMBERSHIP DUES Professional Member: \$50 Professional Member of AIChE: \$15 AIChE Member Number: ____ Undergraduate Student Member: **FRFF** 4. CHECK YOUR METHOD OF PAYMENT Check enclosed (US \$ drawn on a US Bank, made out to Card Number _____ International Society for Water Solutions, AIChE) **Credit Card** MasterCard VISA American Express Print Card Holder's Name Diners Club Discover Card Holder's Signature ____ TOTAL \$ _____ I, the undersigned, attest that the statements I have given are true. I agree to abide by the bylaws of the International Society for Water Solutions.

Signed ______ Date _____