NAPE DC # 1 MEMBERSHIP APPLICATION
BECOME A MEMBER TODAY!

Date _____

Name: _____

Address: _____

City: _____

State/Zip: _____

Phone: _____

Email: _____

Member #: _____

Job Position: _____

NAPEEF Class: _____

Employer: _____

Address: _____

City: _____

State/Zip: _____

Work Phone: _____

Contact Name: _____

Email: _____

Website: _____

Lead Engineer: _____

A

ANNUAL MEMBERSHIP FEE

Student
Manual
All students currently registered for a NAPEEF class receives a free year of student membership

Engineer			
Manual		Automatic	
First	Renewal	First	Renewal
200	170	170	140

Associate			
Manual		Automatic	
First	Renewal	First	Renewal
300	270	270	240

Corporate			
Manual		Automatic	
First	Renewal	First	Renewal
750	720	720	690

* * * PLEASE COMPLETE * * *

☐ **I am paying my NAPE annual dues with the manual option by credit card**

☐ **I authorize NAPE to automatically charge my credit card annually for my yearly dues. I understand that this option allows me to save 20% annually. I understand that if I wish to cancel my membership for any upcoming year, it is my responsibility to notify NAPE 30 days prior to my anniversary date.**

Engineer/Associate/Corporate	Manual(invoice)/Automatic (cc only)	First/Renewal	$

_____Date
Member Signature/Approved By

☐ Paying by Check_____ ☐ Credit Card ☐ PO#_____

Name (As it appears on card):_____ Expiration:_____

Card Number:_____ Security Code (CVV): _____

Billing Street Address:_____ City:_____ State:_____ Zip: _____

Signature: _____

FAX to 703-845-7059 for questions call the office at 703-845-7055 EXT 1004