



MEMBERSHIP APPLICATION - 2012

First Name: _____ Last Name: _____

Title: _____

Please complete both – Check your preferred mailing address

COMPANY/ORGANIZATION:

Company Name: _____

Address: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

Phone: _____ E-mail: _____

HOME ADDRESS:

Address: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

Phone: _____ E-mail: _____

Chapter Affiliation: _____

Primary preferred method of communication (check one): E-mail Mail Other: _____

Please choose the appropriate industry that most closely aligns to your current work experience:

- | | | |
|---|---|---|
| <input type="checkbox"/> Consulting | <input type="checkbox"/> Military | <input type="checkbox"/> Repair Shop (electric motor) |
| <input type="checkbox"/> Instrumentation | <input type="checkbox"/> Municipal (sewer facility) | <input type="checkbox"/> Repair Shop (other) |
| <input type="checkbox"/> Insurance/health | <input type="checkbox"/> Petrochemical | <input type="checkbox"/> Textile |
| <input type="checkbox"/> Machine tool | <input type="checkbox"/> Pharmaceutical (confection/
food/tobacco) | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Manufacturing | | <input type="checkbox"/> University |
| <input type="checkbox"/> Marine | <input type="checkbox"/> Power | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Metals | <input type="checkbox"/> Pulp/paper/print | |
-

Payment Information:

- Individual Membership - \$75 per year (U.S.); \$120 per year (International)
- Check enclosed (*payable to the Vibration Institute; U.S. currency only*)
- MasterCard© VISA© AMEX©

Name on Card: _____

Credit Card #: _____

Expiration Date: _____ Total Amount Charged: _____

Signature: _____

Signature: *The undersigned agrees, if accepted, to comply with the Bylaws and Code of Conduct of the Institute.*

Signature

Date

Send application and payment to:

Vibration Institute
6262 S. Kingery Hwy, Suite 212
Willowbrook, IL 60527
T: 630-654-2254
F: 630-654-2271
E: information@vi-institute.org