



Associate Membership Application

Applicant

| | | |
|---------|-------|-----|
| Name | | |
| Address | | |
| City | State | Zip |
| Phone | Fax | |
| Email | | |

Company

| | | |
|---------|-------|-----|
| Name | | |
| Address | | |
| City | State | Zip |
| Phone | Fax | |
| Website | | |

Sponsor

| | | |
|---------|-------|-----|
| Name | Phone | |
| Address | | |
| City | State | Zip |
| Email | | |



Qualifications for IAEC Associate Membership

Membership in IAEC as an Associate Member is limited to persons engaged in promoting the purpose of the Association who do not meet the requirements of IAEC Professional Membership and are sponsored by a Professional Member of the IAEC. Associate Members shall have all rights and privileges of membership except that they shall not be eligible to vote or hold elected office.

Please submit your completed membership application along with your resume and a check or money order for \$400.00 representing \$100.00 registration fee and \$300.00 for your first year's dues.

Agreement for IAEC Associate Membership

I agree to be governed by the Constitution and By-Laws of the Association and to promote the purposes thereof. It is further agreed that I shall adhere to the Code of Ethical Practices of the Association and understand that such adherence is a prerequisite to becoming (and remaining) a member in good standing.

I authorize IAEC to verify the information contained in this application and, to that end, to contact any reference named or identified in this application or in any document submitted in support of this application. I hereby consent to and authorize the release and disclosure to IAEC of any information, records or correspondence as required to verify the information in the application, which is held by any such entity identified in this application.

| | |
|-----------|------|
| Signature | Date |
|-----------|------|

For Official Use Only

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|----------------------------|------|
| Qualifications Verified By | Date |
| Resume Verified By | Date |
| Recommend Approval By | Date |
| Application Denied By | Date |