



## Professional 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		

Justification for Membership (50 words maximum)

**Please attach resume.**



**Qualifications for IAEC Professional Membership**

Membership in IAEC as a Professional Member is limited to persons or companies who are independently providing services either under contract or for a fee to the vertical transportation industry through inspection, consultation, engineering, etc., and are not employed by or affiliated with companies who manufacture, distribute, install, service, maintain, or sell vertical transportation equipment or components. For the purpose of this association, vertical transportation equipment shall be described as all equipment covered by ASME A17.1, ANSI A10.4, ANSI A10.5, ANSI A90.1 and Amusement Ride Codes and Regulations. An applicant must have a minimum of five years of experience related to the vertical transportation industry with a minimum of one year of experience meeting the qualification requirements of a Professional Member.

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 Professional 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**

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