MEMBERSHIP APPLICATION

Name: ________________________________
Address: ____________________________________________
City: ____________________________________________
State: _______________________________________
Zip Code: _______________________________________
Telephone: _______________________________________
Fax: _______________________________________
Email: _______________________________________
Web Site: _______________________________________

SFA CONSORTIUM INVESTOR: Please check the appropriate box(es):

☐ SFA CONSORTIUM CORPORATE INVESTOR PACKAGE
   Includes privilege CFSEI individual memberships to all engineers within the company
   $2,500.00
   No. of Members ________

☐ SFA INDIVIDUAL INVESTOR
   $100.00
   No. of Individual Investors ________

TOTAL AMOUNT PAID $_________

ATTACH A LIST OF NAMES OF OTHER MEMBERS IF PAYING FOR MORE THAN ONE

PAYMENT OPTION

CHECK NO ________
CREDIT CARD ________
   VISA ☐
   MASTERCARD ☐
   AMEX ☐

NAME ____________________________________________
CARD NUMBER ___________________________ EXPIRATION DATE ________ SEC. CODE ________

Renew your dues online (www.steelframing.org or www.cfsei.org)

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