

# Application for Membership - New Jersey Chapter

## Society of Fire Protection Engineers

Name:	
Title:	
Business / School address:	
Business telephone number: e-mail address:	FAX:
Home address:	
Preferred mailing address: _____ Business _____ Home	
<u>Please check the appropriate Membership Grade</u>	
1. _____ For <b>National SFPE</b> Members Please Circle one: I am a member in good standing as Fellow, Member, Associate, Student, Affiliate, Honorary	
2. _____ I am Not a member of the National SFPE but request membership in the NJ Chapter as a <b>Chapter Supporter</b> .	
3. _____ I am Not a member of the National SFPE but request membership in the NJ Chapter as a <b>Student Member</b> .	
4. _____ I am <b>Retired</b> from all professional income producing activity (FREE).	
Signature: _____	Date: _____
Please remit the initial dues of \$20.00 with this application, payable to "SFPE – NJ Chapter." and mail to: SFPE NJ Chapter c/o Vicki Serafin, P.O. Box 8268 Parsippany, NJ 07054	