



Affiliated With:

American Council of Engineering Companies
Kansas Society of Professional Engineers
National Society of Professional Engineers
Professional Engineers in Private Practice

EMPLOYEE MEMBER APPLICATION

Name _____

Firm _____

Firm Address _____

City _____ State _____ Zip +4 _____

Phone (____) _____ Fax (____) _____

E-mail _____ County _____

Home Address _____

City _____ State _____ Zip + 4 _____

Preferred mailing address for newsletters and other correspondence:

(Check one): Office Home

ACEC Kansas dues (\$10.00 per year) will be paid by:

(Check one): Me My firm

Engineering Field _____

The ACEC of Kansas dues year is July 1-June 30. Dues are billed at the rate of \$10.00 per year.

Signature

Please mail completed application to ACEC of Kansas at:
825 S. Kansas Avenue, Suite 500, Topeka, Kansas 66612
785/357-1824 Fax: 785/233-2206