



MEMBERSHIP APPLICATION

Membership Category (select one):

- Corporate Membership
with optional Scholarship Donation \$175.00 _____
- Corporate Membership \$150.00 _____
- Non-Profit Firm Membership \$100.00 _____
- Individual Membership \$75.00 _____
- Student no cost _____

Organization / Individual / Student Name and Affiliation:

Corporate Delegates (up to 4) with e-mail addresses:

Address: _____

Phone and Fax: _____

Type of Organization: (Please check all that apply) Engineer
 Attorney Contractor Laboratory Industry Waste Services
 Scientist Energy Real Estate Planner Surveyor EH & S
 Remediation Other _____

Environmental services offered _____

Send completed application to: Richard A. Carlone, P.E., 530 Broadway,
Providence, RI 02909 **and pay by either:** **1)** enclosing a check payable to RISEP; **or**
2) using a PayPal link at http://www.risep.org/membership_info.html