

MEMBERSHIP APPLICATION

NEW ____ RENEWAL ____

PERSONAL			
	·		
(Last)	(Firs		(Middle Initial
Home Phone:		Cell Phone:	
E-mail:			
EMPLOYER			
Company Name:			
		Phone No	
EDUCATION			
College / University: _			
Graduation Year:			
PROFESSIONAL REGIST	RATION		
Profession:			
State / Country Registr	ation:		
MEMBERSHIP CLASSIF	ICATION (Check one)		
Regular / Special:	Associate / Affiliate: _	Student:	Honorary:
INTERESTS (Check all t	hat applies)		
Membership	Functions / Outings	Technical	Sports
Fundraising	Licensing / FE Review	Scholarship / Education	Others
I pledge that I will part	ticipate and fully support all activi	ties of the Filipino-American League of E	ngineers and Architects
Signature:		Date:	
BIANNUAL (Every 2 ye	ars) FEES: Please add a one-time fe	ee of Five Dollars (\$5.00) for New applica	ations.
Regular / Special Members - \$40.00		Associate / Affiliate Members - \$20.	00
Student Members - \$5.00		Honorary - Free	

Regular / Special Members need to attach a copy of diploma or professional certificate of registration.

Mail application and a check payable to: FALEA, P.O. Box 4135, Honolulu, Hawaii 96812