

## MEMBERSHIP APPLICATION

NEW \_\_\_\_ RENEWAL \_\_\_\_

| PERSONAL  |                                      |   |                          |
|---|--------------------------------------|---|--------------------------|
| Name:   |                                      |   |                          |
| (Last)  | (First                               | <del>.</del> )  | (Middle Initial)         |
| Address:  |                                      |   |                          |
| Home Phone:                                     |                                      | _ Cell Phone:   |                          |
| E-mail:   |                                      |   |                          |
| EMPLOYER  |                                      |   |                          |
| Company Name:                                   |                                      |   |                          |
|   |                                      |   |                          |
| Position:                                       | Phone No                             |   |                          |
| EDUCATION                                       |                                      |   |                          |
| College / University                            | Degre                                | ee  | Graduation Year          |
| PROFESSIONAL REGISTRA                           |                                      |   |                          |
| Profession:                                     |                                      |   |                          |
| State / Country Registrati                      | ion:                                 |   |                          |
| MEMBERSHIP CLASSIFICA                           | ATION (Check one)                    |   |                          |
| Regular / Special:                              | Associate / Affiliate:               | Student:  | Honorary:                |
| INTERESTS (Check all tha                        | t applies)                           |   |                          |
| Membership                                      | Functions / Outings                  | Technical   | Sports                   |
| Fundraising                                     | Licensing / FE Review                | Scholarship / Education   | Others                   |
| I pledge that I will partic                     | ipate and fully support all activiti | ies of the Filipino-American League of E                            | Engineers and Architects |
| Signature:                                      |                                      | Date:   |                          |
| BIANNUAL (Every 2 years                         | s) FEES: Please add a one-time fee   | waived-free<br>e of <del>Five Dollars (\$5.00)</del> for New applic | ations.                  |
| Regular / Special Members - \$40.00 waived free |                                      | Associate / Affiliate Members - \$20.                               | 00 waived-free           |
| Student Members - \$5.00 waived free            |                                      | Honorary - Free   | •                        |

First time applicant for Regular / Special Member needs 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