



CIRMS Membership Application

Instructions

Complete this form and print it. Fax to 972-883-7202 or mail the completed form and send your payment to: CIRMS, P.O. Box 262333, Plano, TX 75026.

Membership Class

Select which membership class:

- Corporate Sponsor \$1,000.00
- Corporate Sponsor Bronze \$2,000.00
- Corporate Sponsor Silver \$3,000.00
- Corporate Sponsor Gold \$5,000.00
- Corporate Sponsor Platinum \$10,000.00
- Government / Non-Profit Organization Sponsors \$250.00
- Individual Member \$50.00
- Student Member \$25.00

Member Information

Name and Address of Applicant. Corporate and Organizational Sponsors may name up to six

Representative Name:

Organization: _____

Address: _____

City: _____

State: _____

Zip- Code: _____

Phone: _____

Fax: _____

Email: _____

Representative 2 Name:

Phone: _____

Email: _____

Representative 3 Name:

Phone: _____

Email: _____

Representative 4 Name:

Phone: _____

Email: _____

Representative 5 Name:

Phone: _____

Email: _____

Representative 6 Name:

Phone: _____

Email: _____



Areas Of Interest

	Rep 1	Rep 2	Rep 3	Rep 4	Rep 5	Rep 6
Homeland Security	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Industrial Applications & Materials Effects (IAME)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical Applications (MED)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Radiation Protection (RP)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Payment Options

Check # _____

Please make Check payable to CIRMS and mail or fax information to the address above.

Credit Card Type:

Visa

Master Card

American Express

Name On Card:

_____ Expire Date: _____

Card Number:

Signature:
