



New Membership Application

PERSONAL INFORMATION

Last Name _____ First Name _____ Middle Initial _____

Employer or Affiliation _____

Address (circle one: Home or Business) _____

City _____ State _____ Zip Code _____

Phone Number _____ Fax Number _____

E-mail _____

PROFESSIONAL INFORMATION

Are you a licensed PE in Rhode Island? Yes (PE # _____) No

Are you a licensed PE in other states? Yes No
If yes, please list States: _____

If not a PE, do you hold E.I.T. status? Yes (State _____) No

Are you currently practicing structural engineering? Yes No

CATEGORIES OF MEMBERSHIP

Please mark the category of membership you are applying for and send check to address below.
Please make check payable to SEARI.

Member \$60.00* Associate Member \$50.00* Student Member \$0.00

Individuals who are licensed in the State of Rhode Island as professional engineers and practice structural engineering

Individuals who practice structural engineering and who are not otherwise eligible for membership, EIT, and others sharing an interest in the activities of structural engineers and this Association

Individuals who are currently studying engineering in an accredited degree program and who share the interests in the activities of structural engineers and this Association

* Fee includes \$20.00 member fee for NCSEA dues.

SIGNATURE

I hereby state that the above information provided is to the best of my knowledge true and accurate.

Signature

Date

Send to: **SEARI, c/o Matthew Loqa,
49 Batcheller Avenue, Providence, RI 02904**