

**Check All That Apply:**

- Mr. Ms. Mrs. PhD CMfgE CMfgT CEI PE

Name _____
 First/Given Name Middle Initial Last/Family Name

Job Title _____

Check your preferred address for receiving information from SME ("Home" or "Work").

- Home Work

Complete Sections A, B, and C.**A. Home Address:**

Street _____
 City _____
 State/Province _____
 Country _____
 Zip/Postal _____
 Phone () _____
 E-mail _____

Date of Birth: _____

Education: Highest Degree Granted (check one)

- None Associate
 Technician Bachelor
 Master Doctorate

Professional Experience:

No. of years employed in manufacturing _____

Technical Specialty List

Indicate the Technical Specialties most related to your career plans.

CODE	DESCRIPTION
<input type="checkbox"/> C300	Metal Forming & Fabricating (AFFT)*
<input type="checkbox"/> C200	Finishing & Coating (AFP)*
<input type="checkbox"/> F500	Computer Technologies/Design (CASA)*
<input type="checkbox"/> F100	Computer Technologies/Manufacturing Processes (CASA)*
<input type="checkbox"/> F400	Networking & Communications (CASA)*
<input type="checkbox"/> B003	Composites (CMA)*
<input type="checkbox"/> G100	Electronics (EM)*
<input type="checkbox"/> C400	Machining/Material Removal (MTA)*
<input type="checkbox"/> F304	Vision (MVA)*
<input type="checkbox"/> B100	Plastics (PMMA)*
<input type="checkbox"/> F501	Rapid Prototyping (RPA)*
<input type="checkbox"/> F303	Robotics (RI)*
<input type="checkbox"/> F404	Internet/E-Commerce
<input type="checkbox"/> D302	Environmental Control
<input type="checkbox"/> G500	Job Shops
<input type="checkbox"/> C100	Assembly & Joining
<input type="checkbox"/> C500	Packaging
<input type="checkbox"/> D100	Quality
<input type="checkbox"/> D200	Management
<input type="checkbox"/> D300	Plant Engineering & Maintenance

* Increase the value of your membership by adding a Technical Association related to your areas of speciality. There is a small additional fee per association (see Section C).

Please check here if you wish to have your name withheld from organizations other than SME.

B. Work Address:

Company/Organization Name _____
 Division/Dept _____
 Street _____
 Mail Stop/Building _____
 City _____
 State/Province _____
 Country _____
 Zip/Postal _____
 Business Phone () _____
 Fax () _____
 E-mail _____

Number of people employed at this address (check one box only)

- (1) Less than 50 (5) 500-999
 (2) 50-99 (6) 1000-2499
 (3) 100-249 (7) Over 2500
 (4) 250-499

Job Function (check one only)

- (1) Job Shop Owner
 (2) Corporate Executive
 (3) Manufacturing Production
 (4) Manufacturing Engineering
 (5) Quality Assurance/Control
 (6) Product Design R&D
 (7) Factory Automation
 (8) Purchasing
 (9) Other

Your company's end product _____

Signature/Verification

Sign and check below if you would like to receive SME's monthly magazine



I would like to receive **MANUFACTURING ENGINEERING** Magazine.

- Yes No

Signature _____

Date _____

Sponsor Information (optional)

Name _____

Member # _____

**C. Three Convenient Ways to Join:**

SME Web site: www.sme.org

Complete this form and FAX to:

313-240-8252

Complete this form and mail to:

Society of Manufacturing Engineers
 Attn: Corporate Data Center
 One SME Drive - P.O. Box 930
 Dearborn, MI 48121-0930 USA

PAYMENT:

SME Membership Dues: \$75*

Technical Associations (optional):

- Composites Manufacturing (CMA) \$12 _____
 Computer & Automated Systems (CASA) \$12 _____
 Electronics Manufacturing (EM) \$12 _____
 Finishing & Coating (AFP) \$12 _____
 Forming & Fabricating (AFFT) \$12 _____
 Machine Vision (MVA) \$12 _____
 Machining (MTA) \$12 _____
 Plastics Molders & Manufacturers (PMMA) \$12 _____
 Rapid Prototyping (RPA) \$12 _____
 Robotics (RI) \$12 _____

Grand Total (Membership Dues + Each Additional Association) \$ _____

Method of Payment:

- Bankdraft/Transfer
 Check/Money Order
 VISA
 AMERICAN EXPRESS
 MasterCard
 DISCOVER

Card Number _____

Expiration Date _____

*First year dues are \$60, plus a one-time \$15 initiation fee, US funds.

Allow 30 days to receive your membership credentials.

Chapter Name (if applicable) _____

Chapter Number _____

CODE: **WEB01**

FOR HEADQUARTERS USE ONLY

Member No. _____