

STUDENT MEMBERSHIP APPLICATION

RSES 1666 Rand Road Des Plaines, IL 60016-3552
 Phone: 800-297-5660 or 847-297-6464 Fax: 847-297-5038 Web site: www.rses.org



FOR HEADQUARTERS USE ONLY

MC _____ Member No. _____ Chapter No. _____ BC _____

Please enter the information you wish to be shown on all RSES records and correspondence. Complete all sections.

First name _____ MI _____ Last name _____

Home address _____ Apt.# _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____ Phone _____ E-mail _____

U.S. Social Security No./Canada Social Insurance No. (optional) _____

Month/Day/Year of birth _____

Please check if you DO NOT wish to receive: Press releases, notices, announcements, and other information from RSES and the RSES Educational Foundation via: E-mail Fax
 Business-related, third-party offers via: Direct mail E-mail Fax

Having agreed to abide by the Society Bylaws, and those of any Chapter or subsidiary association to which I may belong, I hereby officially apply for membership in RSES.

Signature _____ Date _____

EDUCATION INFORMATION

School Name _____

Address _____ City _____

State/Province _____ Zip/Postal Code _____ Country _____

Name of HVACR instructor _____

Dates attended _____ Years completed _____ Date of graduation _____

IMPORTANT NOTE: Please attach your current course schedule with your application. Both items must be returned to RSES in order for your Student Member application to be processed.

MEMBERSHIP DUES (STUDENT MEMBER DUES: \$50.50 U.S. DOLLARS PER YEAR)

Check enclosed (make payable to RSES)

Credit card VISA MASTERCARD AMERICAN EXPRESS DISCOVER

Card No. _____ Expiration date _____

Authorized signature _____

PLEASE ANSWER

- My primary HVACR role is:** (check one)
 Contractor
 Service Technician/Installer
 Operations/Maintenance
 Manager/Engineer/Technician
 Engineer
 Sales
 Instructor
 Student
 Other _____
 (please specify)
- My firm's business is:** (check one)
 Contracting firm: 1-3 technicians
 Contracting firm: 4-10 technicians
 Contracting firm: 11-19 technicians
 Contracting firm: 20+ technicians
 HVACR industry OEM
 Industrial (manufacturing or processing, not HVACR industry)
 Wholesaler/Distributor
 Commercial/Institutional/
 Government Agency/Association
 Other _____
 (please specify)
- I heard about RSES from:**
 Seminar Direct mail
 Chapter Internet
 Friend RSES Journal
 Employer
 Other _____
 (please specify)

Student membership includes your choice of free T-shirt or cap!

T-shirt (indicate size)

S M L XL
 XXL



Cap