



FSCT Membership Application

To be filled out by FSCT: FSCT ID: _____ Member Type: _____

1. Mailing Address:

Name: _____
Company: _____
Address 1: _____
Address 2: _____
City: _____ State/Prov.: _____
Postal Code: _____ Country: _____

2. Directory Address: Same as mailing

Company: _____
Address 1: _____
Address 2: _____
City: _____ State/Prov.: _____
Postal Code: _____ Country: _____

3. Contact Information:

Work Phone: _____ Fax: _____ Toll Free: _____
Home Phone: _____ Email: _____

4. Demographic Information: (Required – please complete items below)

- A. POSITION CLASSIFICATION (Check primary only)
- Management/Administration (A)
 - Manufacturing and Engineering (B)
 - Quality Control (C)
 - Research and Development (D)
 - Technical Sales/Service (E)
 - Sales and Marketing (F)
 - Consulting (G)
 - Education (H)
 - Librarian/Other (J)
(please specify) _____
- B. COMPANY CLASSIFICATIONS (Check all that apply)
- Manufacturer of
- Liquid Paints (A1)
 - Varnish and Lacquer (A2)
 - Printing Inks (A3)
 - Sealants and Caulks (A4)
 - Adhesives (A5)
 - Powder Coatings (A6)
 - UV/Radiation Curable Coatings (A7)
 - Raw Materials (B)
 - Equipment and Containers (C)
 - Construction Chemical Intermediates (L)
- Sales Agent for
- Equipment (D1)
 - Raw Materials (D2)
 - Government Agency (E)
 - Research/Testing/Consulting (F)
 - Educational Institution/Library (G)
 - Paint Consumer (H)
 - Environmental Affairs (I)
 - Computer Software/Services (K)
 - Other (J)
(please specify) _____

C. PRIMARY COMPANY CLASSIFICATION (Circle only one)
Which one of the above company classifications best describes your company?
A1 A2 A3 A4 A5 A6 A7 B C D E F G H I J K L

Join online at: www.coatingstech.org

6. Signature and Date: (Required)

Signature: _____ Date: _____

7. Annual Dues:

\$75.00 FSCT National Dues
_____ Society Local Dues (total from section 5)
(if applicable)
_____ **Total Amount Due**

As a member of FSCT, you will receive communications via email and postal mail regarding FSCT programs, activities, and benefits. If you do not wish to receive communications, indicate below:

please do not send emails please do not send mail

FSCT occasionally makes available its members' addresses (excluding telephone and email) to vendors who provide products and services to the coatings community. If you prefer not to be included in these lists, please check this box:

5. Membership Dues

(Check all you wish to join*)

FSCT	\$75
<input type="checkbox"/> Arizona Society	\$30
<input type="checkbox"/> Baltimore	\$40
<input type="checkbox"/> British (in USD)	\$64.75
<input type="checkbox"/> CDIC	\$40
<input type="checkbox"/> Chicago	\$40
<input type="checkbox"/> Cleveland	\$50
<input type="checkbox"/> Dallas	\$30
<input type="checkbox"/> Detroit	\$50
<input type="checkbox"/> Golden Gate	\$50
<input type="checkbox"/> Houston	\$35
<input type="checkbox"/> Kansas City	\$40
<input type="checkbox"/> Los Angeles	\$55
<input type="checkbox"/> Louisville	\$20
<input type="checkbox"/> Mexico (in USD)	\$240
<input type="checkbox"/> Montreal (in USD)	\$30
<input type="checkbox"/> New England	\$25
<input type="checkbox"/> New York	\$80
<input type="checkbox"/> Northwestern	\$20
<input type="checkbox"/> Pacific Northwest	\$30
<input type="checkbox"/> Philadelphia	\$30
<input type="checkbox"/> Piedmont	\$20
<input type="checkbox"/> Pittsburgh	\$30
<input type="checkbox"/> Rocky Mountain	\$25
<input type="checkbox"/> Southern	\$25
<input type="checkbox"/> St. Louis	\$80
<input type="checkbox"/> Toronto (in USD)	\$17

*For student/educator or retired member pricing, contact FSCT. If you are interested in only joining a local Society, you must contact that Society directly.

8. Payment Information: FSCT Tax ID: #23-0572702

- Check (payable in U.S. funds drawn on a U.S. bank)
- Credit Card: ___ Visa ___ MC ___ AMEX

Card number: _____ Exp: _____

Name on card (print): _____

Signature: _____

Credit Card Billing Address (if different than mailing address):

OFFICIAL USE ONLY:

Certified by Society

Date

Federation of Societies for Coatings Technology

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