



Company \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Name \_\_\_\_\_

Mobile \_\_\_\_\_

Title \_\_\_\_\_

E-mail \_\_\_\_\_

Address \_\_\_\_\_

Web site \_\_\_\_\_

Sponsor (if applicable) \_\_\_\_\_

## INSTITUTE MEMBERSHIP DUES

PLEASE CIRCLE YOUR DUES AMOUNT

Gross income (repair-related)	<\$1 M	\$1 M to \$2.5 M	\$2.5 M to \$5 M	>\$5M
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Company Membership Categories				
Supporting member	\$3,125			
Contractor	\$345	\$615	\$1250	\$1880
Manufacturer	\$345	\$615	\$1250	\$1880
Consultant	\$345			
Design Professionals	\$345			
Distributor	\$345			
Architect	\$195			
Manufacturer's Rep.	\$195			
Additional Indiv. from Member Co.	\$110			

Individual Membership Categories	
Facility Owner	\$160
Government Agency	\$160
Union	\$160
Individual	\$160
Educator*	\$80
Government Employee*	\$80
Retired†	\$75
Student/Union Apprentice†	\$10

\* Verification of status required—provide copy of I.D. or other documentation.

† Any member that has reached age 65 and has been a member of ICRI for at least 5 years.

## CHAPTER MEMBERSHIP DUES

CHAPTER MEMBERSHIP REQUIRES INSTITUTE MEMBERSHIP

Arizona .....	\$55	Michigan .....	\$50
Baltimore-Washington .....	\$50	Minnesota .....	\$45
Carolinas .....	\$55	New England .....	\$40
Central Florida .....	\$40	North Texas .....	\$40
Chicago .....	\$50	Northern California .....	\$40
Connecticut .....	\$40	Northern Ohio .....	\$40
Delaware Valley (PA, NJ, DE) .....	\$55	Pacific Northwest (OR, WA, BC) .....	\$40
Florida West Coast .....	\$55	Pittsburgh .....	\$30
Georgia .....	\$40	Puerto Rico .....	\$25
Great Plains .....	\$40	Quebec Province .....	U.S. \$20
Greater Cincinnati .....	\$40	Rocky Mountain .....	\$50
Gulf South .....	\$40	Southeast Florida .....	\$40
Hellenic (Greece) .....	U.S. \$50	Southern California .....	\$50
Houston .....	\$40	Southwest Florida .....	\$50
Indiana .....	\$50	Upstate New York .....	\$30
Iowa/Illinois .....	\$40	Virginia .....	\$40
Metro New York .....	\$40	Wisconsin .....	\$40

California State University, Chico Student Chapter .....

## COMPANY SPECIALTIES

COMPANY SPECIALTIES ARE SEARCHABLE ON ICRI'S WEB SITE AND IN THE "WHO'S WHO MEMBERSHIP DIRECTORY" FOR CORPORATE MEMBERS ONLY.

### Contractors:

- Architectural repair c01
- Cathodic protection c02
- Caulking c03
- Cement grouting c04
- Cementitious overlays c05
- Chemical grouting c06
- Coatings c07
- Epoxy injection c08
- Epoxy toppings c09
- Expansion joints c10
- Foundations c11
- Hydrodemolition c12
- Masonry/stone restoration c13
- Post-tensioning c14
- Shotcrete c15
- Slabjacking c16
- Spalls c17
- Structural strengthening c18
- Surface prep (as sub) c19
- Surface sealing c20
- Underwater c21
- Waterproofing c22

### Material Manufacturers/ Distributors/Reps:

- Adhesives MM01
- Admixtures MM03
- Anchors MM04
- Cement-based products MM05
- Coating systems MM06
- Corrosion inhibitors MM07
- Curing compounds MM08
- Elastomeric membranes MM09
- Fibers MM10
- Floors MM11
- Grouts MM12
- Joint and loop fillers MM13
- Joint systems MM14
- Sealants MM15
- Sealers MM16
- Structural strengthening MM17
- Tank linings MM18

### Equipment Manufacturers/ Distributors/Reps:

- Accessories EM01
- Cathodic protection EM02

- Grout pumping equip. EM03
- High-pressure water equip. EM04
- Injection equipment EM05
- Miscellaneous tools EM06
- Shotcrete equipment EM07
- Surface preparation equip. EM08
- Testing equipment EM09

### Engineers/Consultants/ Architects:

- Bridges E01
- Corrosion evaluation E02
- Evaluation E03
- Floors E04
- Foundations E05
- Heavy and civil structures E06
- High-rise structures E07
- Parking structures E08
- Petrographic analysis E09
- Post-tensioning E10
- Structural strengthening E11
- Testing E12
- Underwater E13
- Utilities E14

## PAYMENT

Membership Dues (see Dues schedule) \$ \_\_\_\_\_

Non-North American Continent  
Postage/Phone Surcharge—\$20 \$ \_\_\_\_\_

(All countries except U.S., Canada, Mexico; applies to all categories)

Chapter Dues (see Dues schedule) \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

Note: Dues are not deductible as charitable contributions for tax purposes, but may be deductible as a business expense.

Check Enclosed (U.S. Funds)  Visa  MC  AmEx

Name on card \_\_\_\_\_

Signed \_\_\_\_\_

Card # \_\_\_\_\_ Exp. date \_\_\_\_\_