

AWS Individual Member Applications

AWS Welding Distributor Members are entitled to have 5 Individual Memberships for their employees or customers. Additional individuals may be added to your company's membership roster for an additional charge of \$80 per member. Please feel free to make copies of the Individual Membership Application as necessary.

(1) OFFICIAL COMPANY REPRESENTATIVE

Note: *The designated company representative will be the person contacted in regard to matters related to your company's membership, including roster changes and the annual dues notice.*

Were you ever an AWS Member? Yes No Date of Birth: _____

AWS Membership Number (if applicable): _____

Mr. Mrs. Ms. Dr. Job Title: _____

Last Name: _____ First Name: _____ Middle Initial: _____

Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____ Country: _____

Primary Phone: () _____ Secondary Phone: () _____

Fax Number: () _____ Email Address: _____

BOOK/CD-ROM SELECTION

NOTE: Only New Welding Distributor Members are eligible for these selections. *ONLY TWO SELECTIONS PLEASE.

*You may choose two of the same publications, or two different publications from the list below.

QTY.

- _____ *Jefferson's Welding Encyclopedia (CD-ROM only)*
- _____ *Design and Planning Manual for Cost-Effective Welding*
- _____ *Welding Metallurgy*
- _____ *Welding Handbook (9th Ed., Vol. 2)*



Type of Business

(Check ONE only)

- A Contract Construction
- B Chemicals & Allied Products
- C Petroleum & Coal Industries
- D Primary Metal Industries
- E Fabricated Metal Products
- F Machinery, except electrical (incl. gas welding)
- G Electrical Equip., Supplies, Electrodes
- H Transportation Equip. — air, aerospace
- I Transportation Equip. — automotive
- J Transportation Equip. — boats, ships
- K Transportation Equip. — railroad
- L Utilities
- M Welding Distributors & Retail Trade
- N Misc. Repair Services (incl. welding shops)
- O Educational Services (univ., libraries, schools)
- P Engineering & Architectural Services (incl. assns.)
- Q Misc. Business Services (incl. commercial labs)
- R Government (federal, state, local)
- S Other

Job Classification

(Check ONE only)

- 01 President, Owner, Partner, Officer
- 02 Manager, Director, Superintendent (or Assistant)
- 03 Sales
- 04 Purchasing
- 05 Engineer — welding
- 20 Engineer — design
- 21 Engineer — manufacturing
- 06 Engineer — other
- 10 Architect, Designer
- 12 Metallurgist
- 13 Research & Development
- 22 Quality Control
- 07 Inspector, Tester
- 08 Supervisor, Foreman
- 14 Technician
- 09 Welder, Welding or Cutting Operator
- 11 Consultant
- 15 Educator
- 17 Librarian
- 16 Student
- 18 Customer Service
- 19 Other

Your Technical Interests

(Check all that apply)

- A Ferrous Metals
- B Aluminum
- C Nonferrous Metals, except aluminum
- D Advanced Materials/Intermetallics
- E Ceramics
- F High Energy Beam Processes
- G Arc Welding
- H Brazing and Soldering
- I Resistance Welding
- J Thermal Spray
- K Cutting
- L NDT
- M Safety and Health
- N Bending and Shearing
- O Roll Forming
- P Stamping and Punching
- Q Aerospace
- R Automotive
- S Machinery
- T Marine
- U Piping and Tubing
- V Pressure Vessels and Tanks
- W Sheet Metal
- X Structures
- Y Other
- Z Automation
- 1 Robotics
- 2 Computerization of Welding

(2) Individual Member

Were you ever an AWS Member? Yes No

AWS Membership Number (if applicable): _____ Date of Birth: _____

Mr. Mrs. Ms. Dr. Job Title: _____

Last Name: _____ First Name: _____ Middle Initial: _____

Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____ Country: _____

Primary Phone: () _____ Secondary Phone:() _____

Fax Number:() _____ Email Address: _____

Type of Business: _____ Job Classification: _____ Technical Interests: _____

(Enter appropriate letters or numbers from listings provided on first page of the AWS Individual Member Application. Note: This must be filled out.)

(3) Individual Member

Were you ever an AWS Member? Yes No

AWS Membership Number (if applicable): _____ Date of Birth: _____

Mr. Mrs. Ms. Dr. Job Title: _____

Last Name: _____ First Name: _____ Middle Initial: _____

Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____ Country: _____

Primary Phone: () _____ Secondary Phone:() _____

Fax Number:() _____ Email Address: _____

Type of Business: _____ Job Classification: _____ Technical Interests: _____

(Enter appropriate letters or numbers from listings provided on first page of the AWS Individual Member Application. Note: This must be filled out.)

(4) Individual Member

Were you ever an AWS Member? Yes No

AWS Membership Number (if applicable): _____ Date of Birth: _____

Mr. Mrs. Ms. Dr. Job Title: _____

Last Name: _____ First Name: _____ Middle Initial: _____

Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____ Country: _____

Primary Phone: () _____ Secondary Phone:() _____

Fax Number:() _____ Email Address: _____

Type of Business: _____ Job Classification: _____ Technical Interests: _____

(Enter appropriate letters or numbers from listings provided on first page of the AWS Individual Member Application. Note: This must be filled out.)

(5) Individual Member

Were you ever an AWS Member? Yes No

AWS Membership Number (if applicable): _____ Date of Birth: _____

Mr. Mrs. Ms. Dr. Job Title: _____

Last Name: _____ First Name: _____ Middle Initial: _____

Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____ Country: _____

Primary Phone: () _____ Secondary Phone:() _____

Fax Number:() _____ Email Address: _____

Type of Business: _____ Job Classification: _____ Technical Interests: _____

(Enter appropriate letters or numbers from listings provided on first page of the AWS Individual Member Application. Note: This must be filled out.)