



# Membership Application

OFFICE USE ONLY

PRIORITY CODE MBJHFOO  
Order Number \_\_\_\_\_  
Member Number \_\_\_\_\_

Preferred Mailing Address:  Home  Business Industry:  Healthcare  Service  
 Mr.  Ms.  Mrs.  Dr.  Male  Female  Government  Education  
 Manufacturing

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
M D Y

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

Company Name \_\_\_\_\_ Job Title \_\_\_\_\_

Business Address \_\_\_\_\_ Ste. \_\_\_\_\_

City, State/Province \_\_\_\_\_ Zip+4/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Home Address \_\_\_\_\_ Apt./Ste. \_\_\_\_\_

City, State/Province \_\_\_\_\_ Zip+4/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Area Code/Business Telephone \_\_\_\_\_ Area Code/Home Telephone \_\_\_\_\_

Preferred E-mail Address \_\_\_\_\_ Fax \_\_\_\_\_

### Which one of the following best describes your title?

- |                                     |                                   |                                  |                                    |                                      |
|-------------------------------------|-----------------------------------|----------------------------------|------------------------------------|--------------------------------------|
| <input type="radio"/> Accountant    | <input type="radio"/> Contractor  | <input type="radio"/> Inspector  | <input type="radio"/> Professor    | <input type="radio"/> Student        |
| <input type="radio"/> Administrator | <input type="radio"/> Controller/ | <input type="radio"/> Instructor | <input type="radio"/> Programmer   | <input type="radio"/> Superintendent |
| <input type="radio"/> Advisor       | <input type="radio"/> Comptroller | <input type="radio"/> Machinist  | <input type="radio"/> Retired      | <input type="radio"/> Teacher        |
| <input type="radio"/> Analyst       | <input type="radio"/> Coordinator | <input type="radio"/> Manager    | <input type="radio"/> Scientist    | <input type="radio"/> Technician     |
| <input type="radio"/> Associate     | <input type="radio"/> Director    | <input type="radio"/> Mechanic   | <input type="radio"/> Six Sigma    | <input type="radio"/> Unemployed     |
| <input type="radio"/> Auditor       | <input type="radio"/> Engineer    | <input type="radio"/> Nurse      | <input type="radio"/> Black Belt   | <input type="radio"/> Other          |
| <input type="radio"/> CEO           | <input type="radio"/> Facilitator | <input type="radio"/> Owner      | <input type="radio"/> Six Sigma    |                                      |
| <input type="radio"/> Chemist       | <input type="radio"/> Foreman     | <input type="radio"/> Physician  | <input type="radio"/> Green Belt   |                                      |
| <input type="radio"/> Clinician     | <input type="radio"/> General     | <input type="radio"/> President  | <input type="radio"/> Specialist   |                                      |
| <input type="radio"/> Consultant    | <input type="radio"/> Manager     | <input type="radio"/> Principal  | <input type="radio"/> Statistician |                                      |

ASQ does not sell e-mail addresses to third parties.

### Mailing Lists

Occasionally ASQ shares its mailing list with carefully selected quality-related organizations to provide you with information on products and services. Please check this circle if you **do not** wish to receive these mailings.

### Member Referred By:

Member Name \_\_\_\_\_ Member Number \_\_\_\_\_

## WHY DID YOU JOIN?

To help us understand what's important to you, please tell us the top three reasons why you became an ASQ member.

- Career Development
- Certification Pricing
- In-person Networking
- Involvement in ASQ's Cause
- Involvement in SRO
- Knowledge/Information
- Leadership Opportunities
- Online Networking/Communities
- Product Discounts
- Training

## Customize Your Membership Experience

**1** Member Type:  
 Full \$135  Associate \$77 \$ \_\_\_\_\_

**2** The one geographic Section included with Full membership will be determined by your primary address.\*

Sections (geographic) may be added to any member type for an additional \$20.00 each. Visit [www.asq.org](http://www.asq.org) for a listing of available Sections.

Sections      ,      ,      \$ \_\_\_\_\_

\* Contact ASQ to change your assigned Section.

**3** Forum or Division Selection  
As part of your Full membership you receive participation in one topic- or industry-specific Forum or Division. Use the list below to indicate the Forum or Division number and name.

\_\_\_\_\_ \$ \_\_\_\_\_  
(#) Name included

Additional Forums and Divisions may be added to all levels of membership. Please indicate in the list below the additional Forums or Divisions you would like and total the number you have selected.

- |   |  |
|---|--|
| <input type="radio"/> Audit (19)                          | <input type="radio"/> Human Development and Leadership (13)        |
| <input type="radio"/> Automotive (3)                      | <input type="radio"/> Inspection (9)                               |
| <input type="radio"/> Aviation, Space and Defense (2)     | <input type="radio"/> Lean Enterprise (23)                         |
| <input type="radio"/> Biomedical (10)                     | <input type="radio"/> Measurement Quality (17)                     |
| <input type="radio"/> Chemical and Process Industries (4) | <input type="radio"/> Product Safety and Liability Prevention (25) |
| <input type="radio"/> Customer-Supplier (15)              | <input type="radio"/> Quality Management (1)                       |
| <input type="radio"/> Design and Construction (20)        | <input type="radio"/> Reliability (8)                              |
| <input type="radio"/> Education (21)                      | <input type="radio"/> Service Quality (16)                         |
| <input type="radio"/> Electronics and Communications (5)  | <input type="radio"/> Six Sigma (26)                               |
| <input type="radio"/> Energy and Environmental (11)       | <input type="radio"/> Software (14)                                |
| <input type="radio"/> Food, Drug, and Cosmetic (7)        | <input type="radio"/> Statistics (12)                              |
| <input type="radio"/> Government (22)                     | <input type="radio"/> Team & Workplace Excellence (27)             |
| <input type="radio"/> Healthcare (18)                     |  |

Additional Forum and Division selections:  
Full or Associate member \_\_\_\_\_ x \$10 = \$ \_\_\_\_\_  
total

Total of all items (1-3): \$ \_\_\_\_\_

## Payment Information

- Check or money order (U.S. dollars drawn on a U.S. bank) Make check payable to ASQ.
- MasterCard  Visa  American Express (Check one)

Cardholder's Name (please print) \_\_\_\_\_

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_

Cardholder's Address \_\_\_\_\_

Please submit your application with remittance to:

**ASQ**  
P.O. Box 3066  
Milwaukee, WI 53201-3066 USA  
or fax to 414-272-1734.

You may also join online at [www.asq.org](http://www.asq.org)  
or by calling ASQ Customer Care at  
USA and Canada: 800-248-1946  
Mexico: 001-800-514-1564  
International: +1-414-272-8575

New memberships are effective upon receipt of payment. New members receive one year of membership from the date they join. Members are billed prior to the anniversary date of their membership for next year's dues. Memberships, even those paid by employers, are nontransferable. All prices are subject to change.

In becoming an ASQ member, you have the duty to follow the ASQ Code of Ethics and Society governing documents.