

# FET Membership

July 1, 2021 - June 30, 2022

## FET-Federation of Environmental Technologists, Inc.

W175N11081 Stonewood Dr #203, Germantown WI 53022

262-437-1700 · Fax 262-437-1702 · [info@fetinc.org](mailto:info@fetinc.org) · [www.fetinc.org](http://www.fetinc.org)

### Section 1: Contact Information

Please print or type information below.

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

### Section 2: Member Information

I have the following certifications:

- |  |  |
|--|--|
| <input type="checkbox"/> Active CHMM   | <input type="checkbox"/> Licensed P.E. |
| <input type="checkbox"/> Licensed P.G. | <input type="checkbox"/> CIH           |
| <input type="checkbox"/> CSP           | <input type="checkbox"/> ASP           |

- Age:  Under 25     26-40  
 41-55     Over 56

### Section 3: Member Preferences

Send me information on the following topics of interest:

- Air
- EMS
- HazMat/Waste
- Health/Safety
- Legal/Ethics
- Municipal Issues
- Sediment/Remediation
- Sustainability
- Training (How-To)
- Water

Send me information on seminars and chapter events in the following areas:

- Southeast Area (Metro Milwaukee)
- Southcentral Area (Madison, Janesville, Beloit)
- Northeast Area (Green Bay, Fox Valley)
- Central Area (Wausau, Stevens Point)
- Western Area (Eau Claire, LaCrosse)
- Southern Area (Racine, Kenosha, Chicago)

My business is primarily:

- Manufacturing**  
(chemicals, food, paper, plastic, vehicles, engines, etc.)
- Service**  
(consultants, utilities, law firms, waste removal, etc.)
- Sales**  
(equipment sales or rental, sampling equipment, etc.)
- Government/ Education**
- I am a Student**

### Section 4: Member Categories and Payment Options

Choose a Membership category:

- Individual Member - \$160
- Government Employee - \$100
- Student - \$20
- Unemployed Professional - \$65
- Retiree - \$65
- Patron Company - \$500  
(Includes up to 3 Individuals; see back page for additional information)

Payment Options:

- Check Enclosed                       Please Invoice
- Credit Card VISA, MC, AmEx, Discover (Mail/Fax/Phone ONLY)

Name on Card: \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVV: \_\_\_\_\_

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

The 2021 Membership Year is July 1, 2021 - June 30, 2022. To join, complete this form and mail to FET, W175N11081 Stonewood Dr #203, Germantown, WI 53022; fax to 262-437-1702; or email at [register@fetinc.org](mailto:register@fetinc.org). Checks payable to FET, Inc. Contact FET at 262-437-1700 with additional questions.

## PATRON COMPANY Membership Level Information

### PATRON COMPANY Level Benefits:

- Corporate Support of FET's Mission and Purpose
- Listing on FET Website with your Business Logo
- Receive FET Logo for your Business Website
- Listing in FET Membership Directory as a Patron Company
- Discount on Employment Ads
- Discount on promotional ad space for your business on the FET website and the monthly newsletter
- Membership savings for 4 or more employees

**Patron Company Membership (Includes Up to 3 Individuals) = \$500**

*Additional Patron Company Members can join FET for a reduced rate of \$125 each; add sheets for more members as needed.*

Company Name \_\_\_\_\_

**Individual #1 should fill out information ON THE FRONT OF THIS FORM.**

**Patron Member #2—Included in Patron Fee**  Company, Address, City, State, Zip is the same as listed on the front of this form.

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

\_\_\_\_\_  
Address City State Zip+4

\_\_\_\_\_  
Phone Fax Email

Age:  Under 25  26-40  41-55  Over 56

I have the following certifications:  Active CHMM  Licensed P.E.  Licensed P.G.  CIH  CSP  ASP

**Patron Member #3—Included in Patron Fee**  Company, Address, City, State, Zip is the same as listed on the front of this form.

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

\_\_\_\_\_  
Address City State Zip+4

\_\_\_\_\_  
Phone Fax Email

Age:  Under 25  26-40  41-55  Over 56

I have the following certifications:  Active CHMM  Licensed P.E.  Licensed P.G.  CIH  CSP  ASP

**Patron Member #4—additional \$125 (\$625 total)**  Company, Address, City, State, Zip is the same as listed on the front of this form.

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

\_\_\_\_\_  
Address City State Zip+4

\_\_\_\_\_  
Phone Fax Email

Age:  Under 25  26-40  41-55  Over 56

I have the following certifications:  Active CHMM  Licensed P.E.  Licensed P.G.  CIH  CSP  ASP