

## **KUWAIT CHAPTER**

## **MEMBERSHIP APPLICATION FORM**

PΕ	M	TA

First Name Middle Name	Surname		
Employer/Organization	Corporate Title		
Address			
Telephone No. Mobile/Pager No.	Fax No.	Email	
Categories of Membership Please check the category of membership you are a	applying for and provide the appro	priate dues as described below:	
☐ Individual: KD 15/year☐ Affiliate: KD 15/year	(A firm, corporation, agency of (A person who is a member of (A person who is not a member (Full time student at an Educary)	ACI International) er of ACI International)	
Member Profile Information (Please che	eck what applies to your o	ccupation)	
<ul> <li>□ Officer, Top Management</li> <li>□ Administrative, Operating Management</li> <li>□ Plant, Production &amp; construction</li> <li>□ Design Engineering Management</li> <li>□ Architectural &amp; Engineering Services</li> <li>□ Chemicals and Allied Products</li> <li>□ Construction Machinery &amp; Equipment</li> <li>□ Concrete Block &amp; Brick</li> <li>□ Ready-Mixed Concrete</li> <li>□ Educational Institutions</li> <li>□ Engineering Services</li> </ul>	<ul> <li>□ Contracting Services</li> <li>□ Architectural Services</li> <li>□ Management</li> <li>□ Design Engineer</li> <li>□ Materials Engineer</li> <li>□ Plant Engineer</li> <li>□ Research engineer</li> <li>□ Sale &amp; Marketing</li> <li>□ Technical Specialist</li> <li>□ Testing Laboratory</li> <li>□ Quality Control</li> </ul>	Research Services Concrete Products Educator Student Utility Architect Government Other (Please specify)	
Are you interested to join any ACI Chapter	r Committee?	( ) YES ( ) NO	
Payment Method  Membership fees may be paid as follows:  Cash  Receipt No.  Money Transfer (Payable to ACI-Kuwait  Transaction No.	Cheque No.	e to ACI-Kuwait Chapter)  10 with The Gulf Bank)	
For ACI Kuwait Chapter use only.			
Member No.	Date		

For Detailed Information Please Contact: