

Chicago Area Chapter of the RCI, Inc. (CAC-RCI)

1144 E. State Street, Suite A-215, Geneva, IL 60134

<www.CAC-RCI.org> <CAC-RCI@hotmail.com>

Membership Application / Renewal Form

Please come and join us! We are an organization that is dedicated to the development and maintenance of the highest standards for professional education and training in the roofing industry. Complete this application and become a member of CAC-RCI.

To submit an application, print out this form and either scan and e-mail it to <CAC-RCI@hotmail.com> or send it via post to CAC's Geneva, Illinois address (above). Payment by credit card may only be made through <www.PayPal.com>. Our PayPal account name is our e-mail address. If you would like to pay by check, simply enclose your check when you send your application to our Geneva address.

All new and renewing members need to affirm that they have read and subscribe to the RCI Code of Ethics. In addition, CAC-RCI members have to be members in good standing of our parent organization, RCI, Inc.

Name: _____ **E-mail:** _____

Company _____ **Phone:** _____

Address _____ **Fax #:** _____

City/St/Zip _____

RCI Member #: _____ **RRO Registration #:** _____

RRC Registration #: _____ **RWC Registration #:** _____

Application Type: [] Renewal [] New member

Membership Classification and annual Chapter dues (due January 1st):

[] Professional or Professional Associate, \$100

[] Industry or Industry Associate, \$100

[] Facility Management, \$100

[] Full time student, \$15

Service Categories: Circle all that apply to your practice

A Roof Consulting

B Architectural

C Engineering

D Material Testing

E Expert Witness/Legal

F Roofing and / or General Contractor

G Manufacturing

H Product Sales or Representative

I Educator

J Specifier

K Full time Student

L Property Management

M Residential

N Roof Inspections

O Waterproofing

P Building Facades

I certify that I am a member of RCI, Inc., that I have read and understand the RCI Code of Ethics, and that I agree to abide by its principles. Further, I understand that a breach of these ethics may result in the forfeiture of my membership and RCI professional registration.

Signed: _____ Date: _____