

APICS PROFESSIONAL MEMBERSHIP APPLICATION

Four easy ways to join!

ONLINE: Visit apics.org/join for faster processing and immediate access to key member benefits.

FAX: Send both sides of completed application to (773) 639-3011 with your payment information.

MAIL: Return completed application to APICS, P.O. Box 4050, Carol Stream, IL 60197-4050.

PHONE: Call APICS Customer Support at (800) 444-2742 or (773) 867-1777, M-F 8:00 a.m.-5:00 p.m. CT. Have your credit card ready.

STEP 1: Member Information (Please print or type)

Campaign Code: 8DM88F

APICS CUSTOMER/MEMBER ID NUMBER

Please print your legal name and address as they should appear on a mailing label.

Mr. Mrs. Ms. Miss CPIM CFPIM CIRM CSCP

FIRST NAME

MIDDLE INITIAL

LAST NAME

JOB TITLE

COMPANY NAME

BUSINESS ADDRESS

CITY

STATE/PROVINCE

ZIP/POSTAL CODE

COUNTRY

BUSINESS PHONE

BUSINESS E-MAIL

HOME ADDRESS

CITY

STATE/PROVINCE

ZIP/POSTAL CODE

COUNTRY

HOME PHONE

HOME E-MAIL

Please check your preferred mailing address. Work Home

The following information is requested for identification purposes only.

Female Male

DATE OF BIRTH

LAST 4 DIGITS OF SOCIAL SECURITY NUMBER

Who may we thank for referring you and/or sponsoring your APICS membership?

REFERRING MEMBER'S NAME

REFERRING MEMBER'S APICS ID NUMBER

SPONSORING MANAGER'S NAME

JOB TITLE

BUSINESS ADDRESS

CITY

STATE/PROVINCE

ZIP/POSTAL CODE

COUNTRY

BUSINESS PHONE

BUSINESS E-MAIL

Commercial Third-Party Mailing List Exclusion Policy

On occasion, APICS may provide limited contact information to third parties that offer programs, products, and services that our members may find of interest. The contact information includes name, job title, company, and preferred address, but does not include phone, fax, or e-mail address.

Exclude me from commercial third-party mailing lists.

Please continue application on the back side.

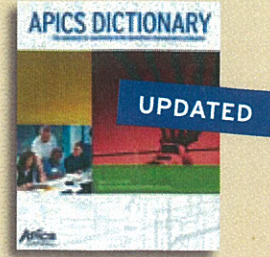


APICS DICTIONARY, 12TH EDITION

John H. Blackstone Jr., Ph.D., CFPIM

The *APICS Dictionary* is a primary reference as well as the standard for defining terms used in the operations management field.

Order your complimentary copy when you become a member!



STEP 2: Membership Dues

CHAPTER AFFILIATION

APICS encourages all members in North America, whose work or home address is within 50 miles of a chapter, to belong to a chapter. Chapter membership dues of \$50 are included with your association dues unless otherwise noted.

Please place me in the North Shore #20 Chapter. (See Chapter Locator on the previous panel)

ANNUAL DUES

Application will be processed upon full payment. A portion of your dues amount supports your local chapter affiliation if applicable.

(a) Association dues \$ 200.00

(b) Additional chapter amount if applicable** \$ N/A

SUBTOTAL \$ 200-

****Additional chapter fee applies for:**

- Phoenix \$15,
- Colorado (Denver) \$10
- Twin Cities \$5
- Mid Carolina \$5

APICS USE ONLY (Do not write in this space)

CHECK # _____

*DUES AMOUNT \$ _____

CHECK AMOUNT \$ _____

(c) I wish to join APICS for 1 year 2 years 3 years Other

Total Dues (a+b) = \$ _____ x No. Years (c) _____ = TOTAL \$ _____

APICS dues are not deductible as a charitable contribution for federal tax purposes, but may be deductible as a business expense in accordance with IRS rules and regulations. A portion of your dues, a \$24 nondeductible value, supports your subscription to *APICS* magazine.

PAYMENT (U.S. dollars only. Purchase orders are not accepted.)

Money Order Check Check # _____ Check amount \$ _____ (Checks must be made payable to APICS and drawn on a U.S. bank.)

Charge to: MC VISA AmEx Discover

ACCOUNT NUMBER _____

EXPIRATION DATE _____

NAME AS IT APPEARS ON CARD _____

SIGNATURE _____

APICS association and chapter dues are subject to change without notice.

STEP 3: Member Profile

Industry Type (Check all that apply)

- | | | | | |
|--|---|--|--|-------------------------------------|
| <input type="radio"/> Automotive | <input type="radio"/> Electrical | <input type="radio"/> Graphic Arts | <input type="radio"/> Pharmaceutical/Chemicals | <input type="radio"/> Biotechnology |
| <input type="radio"/> Aviation/Aerospace | <input type="radio"/> Electronics | <input type="radio"/> Mining | <input type="radio"/> Plastics/Rubber | <input type="radio"/> Machinery |
| <input type="radio"/> Communications | <input type="radio"/> Healthcare/Med. Devices | <input type="radio"/> Transportation | <input type="radio"/> Textile/Apparel | <input type="radio"/> Other |
| <input type="radio"/> Defense | <input type="radio"/> Food/Beverages | <input type="radio"/> Retail | <input type="radio"/> Lumber/Paper | |
| <input type="radio"/> Distribution | <input type="radio"/> Furniture | <input type="radio"/> Maintenance/Repair & Oper. | <input type="radio"/> Software/Hardware | |
| <input type="radio"/> Education | <input type="radio"/> Glass | <input type="radio"/> Metal Fabrication | <input type="radio"/> Utilities | |

Key Areas of Responsibility (Check all that apply)

- | | | | | |
|---|---|--|---|---------------------------------|
| <input type="radio"/> Distribution | <input type="radio"/> Sales/Marketing | <input type="radio"/> Purchasing | <input type="radio"/> Training/Education | <input type="radio"/> Logistics |
| <input type="radio"/> Inventory Control | <input type="radio"/> Finance/Acctg. | <input type="radio"/> Quality/Service | <input type="radio"/> Supply Chain | <input type="radio"/> Other |
| <input type="radio"/> Operations | <input type="radio"/> Professional Services | <input type="radio"/> Human Resources | <input type="radio"/> Self-Employed | |
| <input type="radio"/> Materials Mgmt. | <input type="radio"/> Shipping/Receiving | <input type="radio"/> Management Info. Systems | <input type="radio"/> Planning/Scheduling | |
| <input type="radio"/> Engineering | <input type="radio"/> Production Control | <input type="radio"/> Research & Dev. | <input type="radio"/> Forecasting | |

Your Job Title/Function (Check one)

- Senior Management (CEO/VP/General Manager/Plant Manager) Functional Management (Systems Analyst/Scheduler/Planner)
- Departmental/Division Management (Materials Manager/Operations Manager/Director) Other Professional level

Number of Employees at Your Location (Check one)

- Under 100 100-249 250-499 500-999 1,000+

Why Are You Joining APICS? (Check all that apply)

- | | | |
|---|--|---|
| <input type="radio"/> Networking | <input type="radio"/> Discounts on educational offerings | <input type="radio"/> Chapter activities |
| <input type="radio"/> Career/professional development | <input type="radio"/> Keep up with industry developments | <input type="radio"/> Recommended by employer |
| <input type="radio"/> Certification | <input type="radio"/> APICS publications/magazine | <input type="radio"/> All of the above |
| <input type="radio"/> Recommended by _____ | | <input type="radio"/> Other |

How many years have you been in the operations management field? (Check one)

- 4 yrs. or fewer 5-8 yrs. 9-14 yrs. 15+ yrs.