MEMBERSHIP REGISTRATION FORM

Company (Organization)			Date		
MEMBER INFO	RMATION				
Mr. / Mrs. / Ms. / Miss /	Other P. Eng	/ President / CEO / Di	rector / Manager /	Principal / Retired (include all t	that apply)
urname		Fii	First Name		
Contact Phone no.	ontact Phone no. Email Address		Are you a graduate of the U of M? If yes, what year and discipline?		
Contact Mailing Addres	S				
Number S	itreet		P.O. Box		
City		Prov.		Postal Code	
MEMBERSHIP &	& PAYMENT OPT	ΓIONS			
Full Membership ☐ \$1,000 + \$50 GST = \$1050 per year		Retiree Membership ☐ \$250 per year ☐ \$1,000 lifetime			
Payment Options Cheque (enclosed)	□ Visa □ Mastercard	□Amex			
Credit Card Number				Expiry (MM/YY)	CVV/CVC
Total Amount	Cardholder Sig	Cardholder Signature			
Please make cheques pa For retiree members: if ye			cheques payable to	The University of Manitoba	
Mail to: Brandy O'Reilly, Execu		·		•	

or pay online: www.friendsofengineering.ca/payments

Friends of Engineering (Manitoba) Inc.

c/o E2-290, EITC University of Manitoba

Winnipeg, MB R3T 5V6