



Mid-Atlantic Section of the Institute of Transportation Engineers

MEMBERSHIP APPLICATION

Last Name (Print) _____ First _____ M.I. _____

Home Address _____

City _____ State _____ Zip Code _____

Place of Business – Name and Address _____

City _____ State _____ Zip Code _____

Business Title _____

Telephone Numbers () _____ () _____
Business Home

Fax Number () _____

E-Mail Address _____

Nature of Present Position as related to Transportation Engineering: _____

Referred by: _____

References: If you are a member, with any grade, of the National Institute of Transportation Engineers, references are not required. However, if you are not a member of National Institute of Transportation Engineers, three references are required. Two of the three references must be current Section Members.

<u>Name</u>	<u>Address</u>	<u>Title</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

I am interested in becoming involved in the following committees:

Legislative Affairs () Membership () Technical () Student Chapters () Annual Meeting () Programming ()

By signing below I indicate my desire to become an affiliate member of the Mid-Atlantic Section of the Institute of Transportation Engineers. If approved, my signature below signifies that I will subscribe to the Constitution and By-laws of the Mid-Atlantic Section of I.T.E.

Date: _____ Signature: _____

Return to: **Jeff Uhler, MASITE Membership Chairperson**
Buchart Horn, 445 West Philadelphia Street, P.O. Box 15040, York PA 17405-7040

Section Dues: \$13.00 (make checks payable to MASITE)

This application is for the Mid-Atlantic Section of ITE only. For a National membership application, please contact **Jeff Uhler** (juhler@bh-ba.com) or visit the following website <http://www.ite.org>

FOR OFFICIAL USE ONLY

Received by Membership Committee Chairperson Date: _____

Approved by Membership Committee Chairperson Yes () No ()

Dues sent to Treasurer Yes () No ()