

■ Knowledge/Information

■ Leadership Opportunities

Membership Application

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Order Number _	
Member Number	

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First Name	Mid	dle Initial	Last Nam	e/Family	Name	3	Technical Community Selections Your Professional membership includ industry-specific Technical Communit select which technical communities y	ies. Use the list below to		
Company Name		J	lob Title				☐ Audit	☐ Innovation		
Business Address			Ste.				□ Automotive □ Aviation, Space and Defense □ Chemical and Process Industries	□ Inspection □ Lean Enterprise □ Measurement Quality		
City, State/Provin	ce	Zip+4/Po	stal Code	Country	у		☐ Customer-Supplier ☐ Design and Construction ☐ Education	□ Medical Device □ Quality Management □ Reliability .		
Home Address		,	Apt./Ste.				□ Electronics and Communications □ Energy and Environmental □ Food, Drug, and Cosmetic	□ Service Quality□ Six Sigma□ Social Responsibility		
City, State/Provin	ce	Zip+4/Po	ostal Code	Country	у		☐ Government☐ Healthcare	□ Software □ Statistics		
Area Code/Busin	ess Telephone	,	Area Code/Home Tele	ephone			☐ Human Development and Leadership	☐ Team & Workplace Excellence		
Preferred Email A	ddress	F	-ax				CHOOS	SE ONE:		
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□ Accountant □ Administrator □ Advisor □ Analyst	ne following best describes your title? Contractor Inspector Professor Student Controller Instructor Programmer Superintendent Comptroller Machinist Retired Teacher Coordinator Manager Scientist Technician		erintendent cher	*PI		the U.S. and Territories and \$40 for non-U.S.				
☐ Associate ☐ Auditor ☐ CEO	☐ Director ☐ Engineer ☐ Facilitator	☐ Mechanic ☐ Nurse ☐ Owner	☐ Six Sigma Black Belt ☐ Six Sigma	gma 🖵 Une Belt 🖵 Oth	employed		SUBTOTAL TOTAL with Canadian good	\$s and services tax*		
□ Chemist □ Clinician □ Consultant	□ Foreman □ General Manager	□ Physician □ President □ Principal	Green Belt ☐ Specialist ☐ Statistician			 *NB, NL, NS, and PE residents (15% of subtotal will be added to total) *ON residents (13% of subtotal will be added to total) *Other Canadian residents (5% of subtotal will be added to total) 				
Mailing Lists	ell email addresse	•			l-t-d		ayment Informat eck or money order (U.S. dollars drawn	on a U.S. bank) Make check payable to ASQ		
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Member Referr	red By:					Car	dholder's Name (please print)			
Member Name			Meml	oer Num	ber	Car	d Number	Exp. Date		
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	nderstand what you became a		you, please tell ı r.	us the to	op three		dholder's Address se submit your application with remitta	ince to:		
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New memberships are effective upon receipt of payment. New members receive one year of membership from the date they join. Members are billed prior to the anniversary date of their membership for next year's dues. Memberships, even those paid by employers, are nontransferable. All prices are subject to change.

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ASQ Membership Levels and Benefits Summary

	Student	Professional	Senior, Fellow*
DEVELOP YOUR KNOWLEDGE AND SKILLS			
Quality Progress—digital edition	•	•	•
Digital Quality Management Journal		•	•
Digital Journal of Quality Technology		•	•
Topical e-newsletters	•	•	•
Additional journals (optional)			•
Exclusive access to ASQTV episodes	•	•	•
ADVANCE YOUR CAREER			
Benchmarking reports	•	•	•
Case studies and articles	•	•	•
Industry research	•	•	•
Career Center—online job board and resources	•	•	•
EXPAND YOUR NETWORK			
myASQ online community	•	•	•
Technical Communities	•	•	•
Geographic Community (local section)	•	•	•
SAVE MONEY WITH PROFESSIONAL DEVELOPMENT			
Certification discounts—save on exams and recertification!	•	•	•
Training—in-person or online	•	•	•
Conferences—up to \$200	•	•	•
Books and certification preparation materials	•	•	•
LEADERSHIP OPPORTUNITIES			
Nationally elected leadership positions		•	•
Society-wide voting rights		•	•

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