

Membership Application

Section I

Firm Name _____

Parent Company if branch or subsidiary _____

Address _____

City/State/Zip _____

Phone _____ Fax _____

Website _____

Total Company-wide Personnel _____ Total Full-time State Personnel _____

Date Firm Started _____

Corporate Office in New Mexico: Yes No Branch Office: Yes No

Business Organization Type:

- | | |
|--|--|
| <input type="checkbox"/> Cooperative | <input type="checkbox"/> Joint Venture |
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Limited Partnership |
| <input type="checkbox"/> Sub Chapter S | <input type="checkbox"/> Limited Liability Company (LLC) |
| <input type="checkbox"/> Public | <input type="checkbox"/> Partnership |
| <input type="checkbox"/> Private | <input type="checkbox"/> Sole Proprietorship |

Firm Description (briefly describe the firm's activities; attach an additional sheet if necessary)

Minority Status:

- Certified Small Business
- Disadvantaged Business Enterprise
- Minority Business Enterprise
- Service Disabled Veteran Owned Business
- Women's Business Enterprise

Disciplines Offered (For statistical purposes, indicate which of the following disciplines are provided by the firm. Include only in-house capability by virtue of experience and having a principal registered in the specific field.):

- | | |
|--|---|
| <input type="checkbox"/> Agricultural/Biological Engineering | <input type="checkbox"/> Hydrology |
| <input type="checkbox"/> Architectural | <input type="checkbox"/> Industrial |
| <input type="checkbox"/> Chemical | <input type="checkbox"/> Land Development |
| <input type="checkbox"/> Civil – General | <input type="checkbox"/> Marine & Coastal |
| <input type="checkbox"/> Civil – Structural | <input type="checkbox"/> Mechanical |
| <input type="checkbox"/> Civil – Transportation | <input type="checkbox"/> Mining/Materials |
| <input type="checkbox"/> Computer/Communications/Systems | <input type="checkbox"/> Nuclear/Petroleum/Energy |
| <input type="checkbox"/> Construction Management | <input type="checkbox"/> Planning |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Surveying/GIS/Mapping |
| <input type="checkbox"/> Environmental | <input type="checkbox"/> Water/Wastewater |
| <input type="checkbox"/> Fire/Earthquake/Hazards/Safety | <input type="checkbox"/> Surveying |
| <input type="checkbox"/> Forensic | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Geotechnical | |

For Office Use Only:

- Firm
- Branch
- Pay Direct
- MO Incentive. Click here if eligible and fill in _____%.

Section II

Key Principal or Primary Contact (required)

Full Name	Title
Email Address	Professional Role Within Firm

Add the names of staff members whom you feel would benefit from participation in ACEC. Your firm's ROI on your ACEC membership is directly related to the number of staff who are active in the Council (attach additional sheets if necessary).

Full Name	Title
Email Address	Professional Role Within Firm

Full Name	Title
Email Address	Professional Role Within Firm

Full Name	Title
Email Address	Professional Role Within Firm

Full Name	Title
Email Address	Professional Role Within Firm

Thank you for your interest in ACEC New Mexico. Please return completed form to:

American Council of Engineering Companies New Mexico
Attn: Dawn Tibbetts
P.O. Box 3773
Albuquerque, NM 87190-3773

Questions? Contact Dawn Tibbetts at (505) 888-6161 or at ACECNM@ACECNM.org

Revised 7/09