

MEMBERSHIP APPLICATION
FLUID CONTROLS INSTITUTE, INC.

Date _____

The undersigned applies for general membership in the FLUID CONTROLS INSTITUTE, INC. The products designed, manufactured and sold by the undersigned are _____

We understand that our membership will continue from year to year until a written resignation has been tendered and accepted by the Board of Directors.

Upon acceptance of this application, the executive voting representative will be the following individual:

Name: _____ Title: _____

The Sections of the Institute in which we believe our products qualify us as active members are:

- | | |
|---|---|
| <input type="checkbox"/> Control Valve/Regulator/Solenoid Valve Section | <input type="checkbox"/> Sanitary Section |
| <input type="checkbox"/> General Products | <input type="checkbox"/> Secondary Pressure Drainer |
| <input type="checkbox"/> Pipeline Strainer Section | <input type="checkbox"/> Steam Trap Section |

FCI dues are based on the number of employees in the business unit (corporation, firm, partnership, division, or other business organization) that is engaged in the design, manufacture and sale of the products in the scope of the Institute according to the following:

<u>Employees</u>	<u>2023 Annual Dues</u>	<u>Select Category</u>
0 - 99	\$2,410	<input type="checkbox"/>
100 - 249	\$3,980	<input type="checkbox"/>
250 - 499	\$5,400	<input type="checkbox"/>
≥ 500	\$6,700	<input type="checkbox"/>
Associate	\$1,000	<input type="checkbox"/>

Annual Meeting Fee: \$975.00 (*covers core meeting expenses*)

We understand that our dues and assessments as regular members of the Institute will be those that may be levied from time to time by the Board of Directors.

Signature: _____

Company: _____

Address: _____

Telephone: _____ Fax: _____

E-mail Address: _____

URL: _____

Return to:
Fluid Controls Institute, Inc.
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