

# Membership Application



International Erosion Control Association

## REGION ONE

3401 Quebec St., Suite 3500, Denver, CO 80207-2339  
www.ieca.org | 800-455-4322 | +1 303-640-7554 | 1 866-308-3087

### Personal Information

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Company/Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_

ZIP/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Referred by: \_\_\_\_\_

(Please include the name of the person who told you about IECA.)

Why are you joining IECA? \_\_\_\_\_

(Your Response to this question will help us develop member benefits to meet your needs.)

### Professional Field of Practice (Please check only one box.)

- |  |  |  |   |
|--|--|--|---|
| <input type="checkbox"/> Academic          | <input type="checkbox"/> Government Agency | <input type="checkbox"/> Mining              | <input type="checkbox"/> Non-Profit       |
| <input type="checkbox"/> Consultant        | <input type="checkbox"/> Manufacturer      | <input type="checkbox"/> Landscape Architect | <input type="checkbox"/> Waste Management |
| <input type="checkbox"/> Contractor        | <input type="checkbox"/> Supplier          | <input type="checkbox"/> Ski Industry        | <input type="checkbox"/> Other _____      |
| <input type="checkbox"/> Developer/Builder | <input type="checkbox"/> Media             | <input type="checkbox"/> Stream/Wetland      |   |
| <input type="checkbox"/> Engineer          | <input type="checkbox"/> Utility           | <input type="checkbox"/> Stormwater          |   |

### Membership Category (Please check only one box.)

- |   |  |
|---|--|
| <input type="checkbox"/> Professional Plus  | \$240  |
| <input type="checkbox"/> Professional       | \$170  |
| <input type="checkbox"/> Young Professional | \$100  |
| <input type="checkbox"/> Student            | \$25 (Proof of full-time student status is required.)        |
| <input type="checkbox"/> Emeritus           | \$55 (For those 65 or older, a copy of your ID is required.) |

### Business Partnerships (Please check only one box.)

- |                                      |         |
|--------------------------------------|---------|
| <input type="checkbox"/> Corporate   | \$320   |
| <input type="checkbox"/> Emerald     | \$595   |
| <input type="checkbox"/> Cornerstone | \$2,500 |

### Chapter Dues

IECA Region One membership now includes membership in your local chapter for no additional fee. Your local chapter will be notified once you join. For more information about your local chapter, visit [www.ieca.org/chapter](http://www.ieca.org/chapter). Members have the option to join additional chapters for \$25 per chapter. Please contact IECA Region One if you wish to join additional chapters, 800-455-4322 or 303-640-7554.

### Payment: IECA Region One Total Dues: \_\_\_\_\_

Check enclosed payable to: IECA Region One. Must be U.S. Dollars drawn on a U.S. bank.

Credit Card:  VISA  MasterCard  Discover  American Express

Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

By submitting this application and payment for membership, you agree to uphold IECA Region One's Code of Ethics and other standards established by IECA.

Return completed applications by fax to +1 866-308-3087 or by mail to IECA, 3401 Quebec Street, Suite 3500, Denver, CO 80207-2339. Please allow 1-4 weeks for delivery of your new member packet.