



MEMBERSHIP APPLICATION

Name: _____

Address: _____

City, State, ZIP: _____ County: _____

Residence Business If business, please include firm name: _____

Business Website (optional): _____

Phone (preferred): _____ Mobile: _____

E-mail: _____ Alt. E-mail: _____ Fax: _____

Publish my contact information on the PSLS website: Yes No

Professional Registration (optional):

State: _____ Number: _____

State: _____ Number: _____

Chapter Affiliation: _____

(not required for Affiliate or Sustaining Firm membership)

Please indicate membership grade.

- Member**.....\$200/year PSLS + \$40 NSPS Membership = \$240
(Surveyor licensed in Pennsylvania)
- Associate**.....\$120 year..... **Optional NSPS Membership \$40**
(Non-licensed surveyor or engaged in mapping or GIS)
- Affiliate**.....\$105 year..... **Optional NSPS Membership \$40**
(Member of another state society)
- Retired**.....\$100 year..... **Optional NSPS Membership \$40**
(Having license retired by State Registration Board)
- Retired-PSLS**.....\$50 year..... **Optional NSPS Membership \$40**
(Retired license plus 10 years prior PSLS membership)
- Sustaining**.....\$385 year
- Student**.....\$15 year..... **Optional NSPS Membership \$10**
(Enrolled in a Pennsylvania college or university)
- Auxiliary**.....\$15 year
(Spouse/significant other of a member)

Payment:  **VISA** 

Card #: _____

Mailing Check (payable to PSLS)

Exp. Date: _____ CCV Code: _____

I hereby apply for membership in the Pennsylvania Society of Land Surveyors and, in doing so, agree that I will actively support the bylaws, aims, and objectives of the organization.

Signature of Applicant: _____ Date: _____

**Return form to PSLS | 801 East Park Drive, Suite 107 | Harrisburg, PA 17111
P: 717.540.6811 | F: 717.540.6815 | psls@psls.org | www.psls.org**