



**American Society of Heating, Refrigerating
and Air Conditioning Engineers, Inc.**

**Orange Empire Chapter
Local Membership Dues**

Date:.....

Name: Title:.....

Business Name:.....

Business Address:

Business City, State, Zip Code:

Business Phone:..... Business Fax:

E-Mail:..... ASHRAE Membership No.:.....

Home Address:

Home City, State, Zip Code:

Home Phone:..... Home Fax:.....

E-Mail:.....

Local Membership Dues\$ 40.00

Contributions for Student Activities_____

Contributions for Research_____

TOTAL AMOUNT....._____

Please make check payable to **ASHRAE**
and return this form with your check to:

ASHRAE
Customer Service
1791 Tullie Circle N.E.
Atlanta, GA 30329

(404) 636-8400 ♦ Fax (404) 321-5478

If you are a new member, who invited you to join ASHRAE?

Name: Company: