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Philadelphia, PA 19103

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1989 MEMBERSHIP APPLICATION

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FACILITY																														
STREET																														
P.O. BOX																														
CITY											STATE										ZIP									
PHONE	()					-					EXTENSION														
COUNTRY																														
JOB TITLE																														

PARENT COMPANY (IF DIFFERENT FROM ABOVE)

OFFICIAL REPRESENTATIVE (ORGANIZATIONAL MEMBERSHIP ONLY)

	LAST										FIRST										INITIAL									
NAME																														
TITLE																														

IF HOME ADDRESS TO BE USED FOR MAILINGS PLEASE COMPLETE BELOW (AFTER COMPLETING ABOVE).

ADDRESS																														
CITY											STATE										ZIP									

PLEASE SEND INFORMATION ON THE FOLLOWING COMMITTEES:

BENEFITS AND FEES FOR 1988

MEMBER - ANNUAL FEE	\$ 50.00	1 JANUARY - 31 DECEMBER
ORGANIZATIONAL - ANNUAL FEE	\$350.00	1 JANUARY - 31 DECEMBER

ANNUAL BOOK OF ASTM STANDARDS

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- ONE ANNUAL SUBSCRIPTION TO STANDARDIZATION NEWS
- MEMBER DISCOUNT ON OTHER PUBLICATIONS

MAIL TO: ASTM ATTN: MEMBER SERVICES

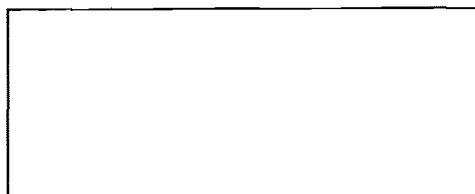
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