JOURNAL OF TESTING AND EVALUATION 255



1916 Race Street Philadelphia, PA 19103

(215) 299-5462 Telex: 710-670-1037

1984 MEMBERSHIP APPLICATION

TECHNICAL NON CHARTER AND E ORGANIZATIONAL AN INDIVIDUAL, ASSOCIATION, C				TEC CHA	AN INDIVIDUAL OR AN INSTITUTION (EDUCATIONAL, PUBLIC LIBRARY, OR A SCIENTIFIC ENGINEERING, OR TECHNICAL NON-PROFIT SOCIETY) SUBSCRIBING TO THE PURPOSES OF THE SOCIETY PROVIDED IN THE CHARTER AND BYLAWS.																	
				N, OF	BUSINESS, GOVERNMENTAL, RESEARCH, OR PROFESSIONAL ORGANIZATION, OR TRADI R SEPARATE FACILITY THEREOF SUBSCRIBING TO THE PURPOSES OF THE SOCIET E CHARTER AND BYLAWS.																	
PLEASE F	PRINT AL	L INF	ORMA	TION	CLE	ARL'	Y. DO	NOT	EXC	EED TH	HE CA	PACI	TY OF E	ACH	LINI	E .						
	LAST								FI	RST								i d	VITIAL			
NAME																						
OMPANY NAME									1		1 1										H	
OB TITLE					7				T													
FACILITY											11											
STREET									\top		11					\top		T				
BOX NO																	4965					48
CITY													STATE	Γ		ZIP						
PHONE	()			-			E	XTENS	ON	-										
OUNTRY																						
			Aralia.		741 5137 1 1 3 3 1		in to				 ,			1		!						
OFFICIAL	REPRES	SENTA	TIVE (DRGA	NIZ/	ATIO	NAL	MEMB	FRSI	HIP ON	II V)		-				<u> </u>	<u>1. 902.3141</u>				
						975			21.0								i yay		7. T. S.			1.44
	LAST		ΙΤ	TI	1			-r	F	IRST	1 1		i i i		- T			1 T	VITIAL			
NAME	$\vdash \vdash \vdash$		$\vdash \vdash$	H	-	+		\dashv	+	+ +	+ +	-	 -		+		+	++	-			
					- 1		1 1	İ	-					il	1	1 1		<u> </u>	<u></u>			
TITLE	ЩЦ	(10.4 (70.7)	Ш.	Ш			<u> </u>	· · · · · · · · · · · · · · · · · · ·	-1	ــــــــــــــــــــــــــــــــــــــ				نــــــن			1. 1.54	de la constitución de la constit		grant to the San San		
				<u> </u>					;	······												
	ADDRES	SS TO	BE USI	L l	DR M	Alli	NGS F	PLEAS	SE C	OMPLE	TE BI	ELOW	(AFTER	CO	MPLE	TING	ABOV	'E).				
	ADDRES	SS TO	BE USI	D F(DR M	AILI	NGS F	PLEAS	SE C	OMPLE	TE BI	ELOW	(AFTER	co	MPLE	TING	ABOV	'E).				
F HOME	ADDRES	SS TO	BE USI	ED FC	OR M	AILI	NGS F	PLEAS	SE CO	OMPLE	ETE BI	ELOW	(AFTER	co	MPLE	TING	ABOV	**************************************				
F HOME ADDRESS	ADDRES	SS TO	BE USI	ED FC	DR M	Alli	NGS F	PLEAS	SE CO	OMPLE	ETE BI	ELOW	(AFTER	co	MPLE	ZIF		'E).				
F HOME	ADDRES	SS TO	BE USI	ED FC	DR M	Alli	NGS F	PLEAS	SE C	OMPLE	ETE BI	ELOW		co	MPLE			'E).				
F HOME									¥ , , ,			ELOW		co	MPLE			(E) .				
F HOME								IG CO	MMI	TTEES					MPLE			′E) .				
F HOME ADDRESS CITY PLEASE S MEMBE		FORM/	ATION	ON T	THE F			IG CO	MMI	TTEES TS A		EES	STATE		MPLE	ZIF	ANUA	ARY - 3		CEMBER		
F HOME ADDRESS CITY PLEASE S MEMBE	SEND IN	FORM/	ATION	ON T	THE F	FOLL	OWIN	IG CO BEN	MMI	TTEES TS A	ND F 50.00	EES	STATE	984		ZIF	ANUA	ARY - 3				

MAIL TO: ASTM ATTN: MEMBER SERVICES

8/83 PRINTED IN USA

MOVING?

To insure uninterrupted service on your JTE subscription, please notify us at least six weeks before you move.

- 1. Attach your address label from a recent issue in the space provided opposite. (If label is not available, be sure to give your old address, including Zip Code.)
- 2. Print your name, membership no., and address below. (Be sure to include Zip Code.)
- 3. Mail entire notice to: ASTM

 Journal of Testing and Evaluation
 P.O. Box 64106

 Baltimore, MD 21264

Name		Membership No
New Address _		
City	State State	Zip Code
	(pieuse print or type the	above information)