



**Annual FPA Member / Sponsor Application**

*For Corporate Members: The Membership information below is for Employee No. \_\_\_ of \_\_\_*

**MEMBERSHIP** (Fees are per year)

Select One Category: \_\_\_ Member (\$96) \_\_\_ Corporate Member (\$240)\* \_\_\_ Student Member (\$12)

*\*For more than 4 members from a company, corporate annual dues increase \$60/member*

**Contact Information**

Name \_\_\_\_\_ Email\* \_\_\_\_\_

Licenses/Certifications \_\_\_\_\_

Company Name \_\_\_\_\_ Website \_\_\_\_\_

\_\_\_ Company or \_\_\_ Home Address: \_\_\_\_\_

Tel. No. 1 \_\_\_\_\_ Tel. No. 2 \_\_\_\_\_ Fax No. \_\_\_\_\_

*\*For Corporate Members, each employee’s email address **must be unique***

**Member Expertise**

*Each member may choose only up to three (3) below categories for the website listing:*

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Architects                | <input type="checkbox"/> Attorneys              | <input type="checkbox"/> Builders                  |
| <input type="checkbox"/> Building Code Consultants | <input type="checkbox"/> Civil Engineers        | <input type="checkbox"/> Forensic Engineers        |
| <input type="checkbox"/> Forensic Consultants      | <input type="checkbox"/> Geotechnical Engineers | <input type="checkbox"/> Government                |
| <input type="checkbox"/> Inspectors                | <input type="checkbox"/> Remodelers             | <input type="checkbox"/> Repair Contractors (Fdns) |
| <input type="checkbox"/> Structural Engineers      | <input type="checkbox"/> Specialist Consultants | <input type="checkbox"/> Supply Vendors            |
| <input type="checkbox"/> Students                  | _____   | _____  |

**SPONSORSHIP (Optional)**

Select Category(s): \_\_\_ Room (\$\*\*) \_\_\_ Website/Member (\$120) \_\_\_ Website/Non-Member (\$360)\*

*\*Non-Member website sponsors **must complete** above Contact Information*

*\*\*For Room Sponsors, the cost is variable and you will be invoiced for monthly charges*

*For more information, see: [foundationperformance.org/site\\_sponsors.cfm](http://foundationperformance.org/site_sponsors.cfm)*

**Payment**

Per my calculations: \_\_\_\_\_, enclosed is my check/money order for \$\_\_\_\_\_.

In affixing my signature below, I certify that I have not listed myself in an expertise category containing the word “engineer”, “architect”, or other licensed profession unless I have and will maintain the appropriate license for that professional expertise category in the State of Texas for the term of my FPA membership.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Print & Mail to:** Foundation Performance Association, c/o Michael Skoller, P.E. ,  
2020 North Loop W. Suite 230, Houston, Texas 77018-8103

**Questions?** [foundationperformance.org/contacts.cfm](http://foundationperformance.org/contacts.cfm), or call Ann Nelson: 281-420-1739