



2017-18 MEMBERSHIP APPLICATION FORM

Please complete this form to become a new member to the Society for Women Environmental Professionals (SWEP) Massachusetts chapter.

TYPE OF MEMBERSHIP	ANNUAL MEMBERSHIP FEE
Individual	<input type="checkbox"/> \$50.00
Full-time Student	<input type="checkbox"/> \$15.00

PRIMARY CONTACT INFORMATION:

Name: _____

Title: _____

Company: _____

Address: _____

Phone: _____

Email: _____

PLEASE CHECK THIS BOX IF YOU ARE INTERESTED IN GETTING INVOLVED IN OUR PROGRAM PLANNING:

PLEASE CHECK THIS BOX IF YOU WOULD LIKE TO LEARN MORE ABOUT THE BENEFITS OF YOUR COMPANY HOSTING A SWEP EVENT:

WHAT GEOGRAPHIC AREA BEST DESCRIBES THE LOCATION OF YOUR OFFICE:

Boston/Cambridge North Shore South Shore Metrowest Central/Western

FIELD OF EMPLOYMENT:

Academia Consulting Financial Government
 Insurance Laboratory Services Legal Lobbyist
 Non-profit Private Industry Real Estate Other: _____

Return the completed form with a check made payable to SWEP Massachusetts to:
Katherine Mears, 303 Wyman Street Suite 295, Waltham, MA 02451

For any questions about membership, please contact Suna Bayrakal at sbayrakal@hotmail.com