



Membership Application/Renewal

SEND THIS FORM TO:

SPIE • P.O. Box 10
Bellingham, WA 98227-0010 USA

Tel: + 1 360 676 3290 (Pacific Time)
Fax: + 1 360 647 1445

customerservice@spie.org

1. Name and Address: (Please print name clearly)

Prefix	Last (Family) Name	First (Given) Name	Middle Name or Initial	Suffix

A. HOME ADDRESS

Street Address _____
 City _____ State _____ Country _____ Zip/Postal Code _____

B. BUSINESS ADDRESS

Company Name _____
 Department/Mail Stop _____
 Street Address _____
 City _____ State _____ Country _____ Zip/Postal Code _____
 Email Address _____ Cell/Mobile _____
(Email address is required for monthly Newsletters notification.)
 Business Phone (_____) _____ Ext. _____ Fax (_____) _____
 Title or Position _____ Date of Birth _____ Highest Degree Received _____

2. Annual BACUS Membership Dues

- BACUS Membership \$50
 Add BACUS Membership to already existing SPIE General Membership \$25

Dues Total

\$ _____

3. Important Membership Census

In order to better serve you and your technical community, please answer the three questions below. SPIE will use this information to create products and services that fit your interests and professional needs.

Please indicate your principal job function.

(Check one only)

Research and Development

- rda Applied Research
 rdb Basic Research
 rdp Applications and Product Development

Engineering

- eng Design
 prod Production

Manufacturing

- seng Systems
 meas Measurement

Management

- corpm Corporate
 techm Technical/Lab
 progm Project/Program

Other

- con Consultant
 ed Educator
 purch Purchasing
 mkt Sales and Marketing
 Other (please describe):

What is the primary end product or service of your company?

(Check one only)

- air Aerospace and aviation systems
 ag Agriculture, food, forestry systems
 meas Analytical or measurement instrumentation
 auto Automotive or ground transportation equipment
 chem Chemical, pharmaceutical equipment
 comm Communications
 consu Consumer products
 detect Detectors, cameras, sensors
 semi Electronics, optoelectronics, semiconductors, IC
 ener Energy, petroleum, solar services
 eng Engineering, design
 env Environmental monitoring
 fed Federally-funded lab
 fiber Fiber optic components and systems
 imag Imaging, displays, entertainment
 indus Industrial and manufacturing equipment
 infotec Information technology equipment
 laser Lasers and laser systems
 med Medical and biomedical
 micro Microlithography and photomask
 def Military, defense, or law enforcement equipment
 nano Nanotechnology, micro-optics, MEMs
 opcom Optical components, materials and systems
 pub Photographic, printing, publishing
 plas Plastics, polymers, rubber
 sens Remote sensing
 robo Robotics and industrial control systems
 ed Universities, colleges, institutions
 Other (please describe):

Which of the following products do you recommend, specify, use or purchase?

(Check all that apply)

- laser Lasers
 light Other Light Sources
 lasera Laser Accessories
 lasers Laser Systems
 disp Displays
 detect Detectors, Sensors and Cameras
 imag Imaging Equipment
 opcom Optical Components
 opdes Optical Fabrication and Design Services
 mat Materials and Chemicals
 pos Positioning & Vibration-Isolation Equipment
 elec Electronics & Signal-Analysis Equipment
 test Test and Analysis Equipment
 fiber Fiber Optics
 comp Computer Hardware and Software
 Other (please describe):

None of the above



Membership Application/Renewal

5. Payment Method

Check enclosed, payable to SPIE, in U.S. Dollars (by draft on a U.S. bank, or international money order) is required.
Do not send currency.

Charge Card: VISA MasterCard Diners Club American Express Discover

Card Number: Security Code

I authorize SPIE to charge the payment fee to my credit card.

Expiration Date _____ \ _____ Signature _____
Month Year

Payments will be charged in USD and converted to your local currency by the credit card company or bank.

For wire transfers and bank information, please contact SPIE at customerservice@spie.org.

TOTAL

\$

Send this form to SPIE, P.O. Box 10, Bellingham, WA 98227-0010 USA

Please allow 2-4 weeks to process this application. Your BACUS Membership will be effective the first of the month following receipt of application and dues. You will receive a Membership card and New Member Packet detailing your benefits.

For more information on BACUS membership:

Tel: + 1 360 676 3290 • Fax: + 1 360 647 1445