

BMETS

Baltimore Medical Engineers and Technicians Society

2010 – 2011 Application for Corporate Membership

*Corporate Membership is \$55.00 for each individual

Facility Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Type of Facility: _____

Business Phone: (_____) _____ Fax Number: (_____) _____

Our Corporation is donating \$ _____ to the BMETS Scholarship fund.

1.) Name of Individual: _____ E-Mail Address: _____

Job Title or Expertise: _____

Publish info in the BMETS Directory? Yes No Willing to serve as: BMETS Officer? Committee Member?

Signed _____ Dated: _____

2.) Name of Individual: _____ E-Mail Address: _____

Job Title or Expertise: _____

Publish info in the BMETS Directory? Yes No Willing to serve as: BMETS Officer? Committee Member?

Signed _____ Dated: _____

3.) Name of Individual: _____ E-Mail Address: _____

Job Title or Expertise: _____

Publish info in the BMETS Directory? Yes No Willing to serve as: BMETS Officer? Committee Member?

Signed _____ Dated: _____

4.) Name of Individual: _____ E-Mail Address: _____

Job Title or Expertise: _____

Publish info in the BMETS Directory? Yes No Willing to serve as: BMETS Officer? Committee Member?

Signed _____ Dated: _____

5.) Name of Individual: _____ E-Mail Address: _____

Job Title or Expertise: _____

Publish info in the BMETS Directory? Yes No Willing to serve as: BMETS Officer? Committee Member?

Signed _____ Dated: _____

Mail to: James Bissett, PO Box 612, Linthicum Heights, MD 21090

NOTE: The Individual Membership is a separate membership form located on the B.M.E.T.S. web site listed below.
Newsletters are sent in an e-mail format ONLY. (Make sure your email is entered above.)

* Your application is subject to acceptance by the Membership Committee.

www.BMETS.org