

Florida Association of Sinkhole Stabilization Specialists

Application for Individual Membership

Type of Membership Applied For: Individual Professional - Individual Student

Individual's Name:

Physical Address:

Mailing Address:

Describe your interest in joining FAS3:

Describe your community, corporate and/or business history (attach additional sheets if required):

Describe your experience history with the sinkhole stabilization processes reflected by FAS3 (attach additional sheets if required):

For Students:

College & Expected Graduation Date:

Major(s):

Do you hold a professional license or registration?

If so, what type and number:

Have any complaints been lodged against your license or company with the Dept. of Business and Professional Regulation. If so, include documentation on each incident including resolution. Include any pending actions not yet resolved.

Applications must be received and deemed complete at least 15 days prior to the next scheduled Membership meeting date to be considered for a vote. A response will be sent to the applicant as to their membership status within 10 days after the meeting date.

By signing and submitting this application for membership to the Florida Association of Sinkhole Stabilization Specialists, you are stating that you agree to the rules and tenets of the Association. A prompt review of the information included in this application will be made. Additional information may be required after review by the Membership Committee.

Applicant Signature

Date

Print name

Sponsoring Member

[] number of attached sheets included with application.