

New Mexico Professional Surveyors 2018 Membership Application

Last Name *Member Directory will be published on the NMPS website. Check Box if you wish to opt out.*

First Name

Mailing Address Personal Business

City

State / Zip Code

Phone (area code) Personal Business

Employer Name

E-mail Address

Membership Type **Chapter**

PLEASE MAKE CHANGES AS REQUIRED

Corresponding members may belong to any chapter

Full Member	\$165/yr	Corresponding Member	\$124/yr	Four Corners (Farmington)	Middle Rio Grande (Albuquerque)
Sustaining Member	\$291/yr	Retired / Life Ach Recipients	\$0/yr	Las Vegas (Las Vegas)	North Central (Santa Fe)
Corporate Member	\$907/yr	Technician/Intern	\$124/yr	Llano Estacado (Roswell/Hobbs)	Southern Rio Grande (Las Cruces)
Associate Member	\$82/yr	NMSU / CNM Students	\$0/yr		

FULL MEMBERSHIP – is for the Professional Surveyor, and you must be a licensed PS.
SUSTAINING MEMBERSHIP – is for a NM Professional Surveyor who wishes to show additional support to NMPS.
CORPORATE MEMBERSHIP – is for a surveying related Company, and must be approved by the membership committee.
ASSOCIATE MEMBERSHIP – is for a Non PS who is associated with or sincerely interested in the surveying profession.
CORRESPONDING MEMBERSHIP – is for a Licensed NM Professional Surveyor who resides outside of New Mexico.
RETIRED MEMBERSHIP – is for NM Professional Surveyor with retired status with the NM Board of Registration.
TECHNICIAN/INTERN MEMBERSHIP – is for either a Survey Technician or Land Surveying Intern.

Dues	<input type="text"/>
Reinstatement Fee	<input type="text"/>
NMPS Dues (\$40/yr)*	<input type="text"/>
NMPS Lobbyist Support	<input type="text"/>
NMPS Ed. Foundation Support	<input type="text"/>
Total Amount Due	<input type="text"/>

***Full, Sustaining, or Corresponding members do not pay All other types include \$40 fee to opt in to NMPS Membership**

There is a \$15 Reinstatement Fee for all Membership Applications not postmarked by March 31, 2018 (Excluding First Time Members)

I hereby authorize NMPS to bill my credit card for Total Amount Due:

Card No:

Name on Card:

Billing Address:

City / State:

Zip Code: **Exp. Date:**

Signature:

Note: All credit card charges will incur a 3% processing fee

RETURN COMPLETED FORM AND CHECKS MADE PAYABLE TO:

NMPS
Executive Director
412 N. Dal Paso
Hobbs, NM 88240

Effective January 1, 1994, under the Omnibus Budget Reconciliation Act of 1993, membership dues may be deductible under the Internal Revenue Code, but are not deductible as charitable donations.

OFFICE USE ONLY: Postmark Date _____ Check/Inv # _____
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