

American Institute of Chemists
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Corporate Membership Application

Company Name _____

Address _____

City/State/Zip _____

Phone/Fax/Email _____

Contact Person _____

Website _____

Description of Company (50 words or less)

Membership Category: (circle one)

Corporate Member \$2,500

Charter Corporate Member \$3,500

Payment Type:

_____ Check Number Visa MasterCard American Express

Account Number _____ Expiration Date _____

Purchase Order Number: _____

(If using a purchase order, please include copy)

Thank you for becoming part of the American Institute of Chemists and assisting us with promoting chemistry.

For Office Use Only:

Date Received: _____ Amount Paid _____