

Individual Membership Reinstatement Application Select Membership for which you are applying:

Previous Member Number:			PLEASE PRINT ALL INFORMATION CLEARLY.
Building Safety Professional Me \$185 One Year Membership	mber An individual who is inte Two-Year Discount \$31		s and objectives of the ICC. r Discount \$444
Student Member (Attach a copy of a \$55 One Year Membership	current transcript showing at lea Two-Year Discount \$94		Estimated graduation date:
Participating Member \$60 One Year Membership			
Mr. Ms. NAME			
TITLE			
E-MAIL			
ORGANIZATION/JURISDICTION			
PHONE (SPECIFY COUNTRY AND CITY CODE IF OUTSIDE THE U.S.)		T.	FAX (specify country and city code if outside the u.s.)
SHIPPING ADDRESS			
CITY			
STATE/PROVINCE		P/POSTAL CODE	COUNTRY
BILLING ADDRESS (IF DIFFERENT)			
CITY			
STATE/PROVINCE		P/POSTAL CODE	COUNTRY
Check here if you would like to receive inf	ormation about ICC products a	nd services via: E-	mail

Payment Information Annual membership dues must be prepaid. Complete and print this application to include with a check or money order. Credit card payments must be completed online or by telephone at www.iccsafe.org/membership or 888-ICC-SAFE (888-422-7233) x33804.

Enclosed is my: CHECK (Payable to International Code Council) MONEY ORDER

Submitting the Application Mail this application, along with a check or money order for your dues, to International Code Council, Attention Member Services, 900 Montclair Road, Birmingham, AL 35213-1206.