

Corporate Membership Reinstatement Application

PLEASE PRINT ALL INFORMATION CLEARLY.

Previous Member Number:			
Select Membership for which you	ı are applying:		
\$660 One Year Membership	Two-Year Discount \$1,122	Three-Year	Discount \$1,584
ORGANIZATION			SALES TAX EXEMPT? See below*
Mr. Ms.			
CONTACT NAME			
TITLE			
EMAIL			
PHONE (SPECIFY COUNTRY AND CITY CODE IF OUTSIDE	THE U.S.) EXT.		FAX (SPECIFY COUNTRY AND CITY CODE IF OUTSIDE THE U.S.)
SHIPPING ADDRESS			
CITY			
STATE/PROVINCE	ZIP/P0	OSTAL CODE	COUNTRY
BILLING ADDRESS (IF DIFFERENT)			
CITY			
STATE/PROVINCE	ZIP/P	OSTAL CODE	COUNTRY
Check here if you would like to receive i	nformation about ICC products and s	services via email	:
*Is your organization tax exempt?	No Yes: If yes, a copy of yo	ur tax exempt cer	rtificate is required.

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. *Credit card payments may be submitted online at www.iccsafe.org/membership/join-icc. Questions? Contact us at members@iccsafe.org or 888-ICC-SAFE (888-422-7233) ext 33804.*