PHILIPPINE INSTITUTE OF CIVIL ENGINEERS, INC.
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Email: pice.org.ph,
Website: www.pice.org.ph

PHOTO
(Required)

1 pc. -2" x2"
1 pc. -1" x1"

APPLICATION FOR LIFE MEMBERSHIP

Application Code: _____
Year Month No.

Date Submitted : _____

Name _____ Sex _____ Status _____
Surname First Name Middle Name

Date of Birth _____ Place of Birth _____

Original Chapter _____ Change of Chapter _____

Date of PICE Membership _____ Date of Transfer _____

PRC Registration Certificate No. _____ Date Issued _____

Name of Office _____ Position _____

Office Address _____ Tel. No. _____ Email _____

Home Address _____ Tel. No. _____Cell No._____

Amended By Laws approved SEC on October 28, 2010
SECTION 6 – LIFE MEMBERSHIP – Any Regular member who, at the time of his application for this classification shall have been a member in good standing of the Institute continuously for at least **TEN 10 YEARS** shall be classified as Life Member after verification and approval of his application by the National Board of Directors. Life membership shall thereafter become effective only upon payment of the Life Membership fee prescribed under Section 3 of Article VIII of these By-Laws. A Life Member shall continue to possess and enjoy all the rights and privileges of a Regular Member in good standing but shall already be exempt from the payment of annual dues **AND SHALL ATTEND EITHER THE REGIONAL CONFERENCES, MID-YEAR OR ANNUAL CONVENTION AT LEAST ONCE A YEAR.** He shall, however, still be required to pay all special assessments levied against the active members, the non-payment of which may result in temporary curtailment of his privileges to vote or to be voted upon.

CERTIFICATION BY THE CHAPTER:

Date _____

_____
Chapter

Certified as to payment of PhP 5,000.00

_____
Chapter Treasurer

Certified as to applicant's the compliance to the Life Membership Requirements

_____
Chapter Secretary

Endorsed to the National Board for approval:

_____
Chapter President

_____
Signature over Printed Name

National Administrative Office

Date Received _____
By _____

VERIFICATION *by the National Office*

No Record ( ) With Arrears ( )Dropped ( )Member since _____

Back dues :

Year	National	Chapter	TOTAL

Reinstatement Fees
Total

Qualified ( ) Not Yet Qualified ( )

LM Fee Payment : _____ *OR No.* _____ *Date:* _____
Validated By: _____ *Noted By:*_____
For Board Approval On : _____
*If not qualified: Refund Details.*_____

ACTION OF THE NATIONAL BOARD OF DIRECTORS :

Verified and Recommended for Approval :

Board Meeting Date: _____

Approved By the National Board of Directors pursuant to Section 6, Article II of the PICE By-Law

_____ _____
20_____ Chairman, Membership Committee/National Secretary *20_____ National President*

LM No. _____
Date: _____