



# CPSA

## Coal Preparation Society of America Personal Membership Application

**I am applying for:**

- New Membership  
 Renewal Membership

**Membership Category:**

- Standard Member (\$50/year)  
 Student Member\* (\$25/year)

**Application Date:**

\_\_\_ / \_\_\_ / \_\_\_  
mth / day / year

**Contact Information (please print clearly):**

Prefix:  Mr.  Mrs.  Ms.  Dr.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Initial: \_\_\_\_\_

Company: \_\_\_\_\_

Job Title: \_\_\_\_\_

E-Mail (required): \_\_\_\_\_

**Mailing Address (please print clearly):** It this a  company or  home address?

Street: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_

Country: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Primary Interests (mark all that apply):**

- |   |   |
|---|---|
| <input type="checkbox"/> Industry news                  | <input type="checkbox"/> Maintenance tips             |
| <input type="checkbox"/> Case histories                 | <input type="checkbox"/> General education            |
| <input type="checkbox"/> Operating and maintenance tips | <input type="checkbox"/> Refuse disposal/impoundments |
| <input type="checkbox"/> Instrumentation and controls   | <input type="checkbox"/> Coal user perspectives       |
| <input type="checkbox"/> Political and regulatory news  | <input type="checkbox"/> Thermal drying               |
| <input type="checkbox"/> Economics and finance          | <input type="checkbox"/> Job postings/openings        |
| <input type="checkbox"/> Quality assurance programs     | <input type="checkbox"/> Other _____                  |
| <input type="checkbox"/> Weighing and sampling systems  | <input type="checkbox"/> Other _____                  |

**Payment Information:**

Mail check (or money order) payable to CPSA  
to the following address:

CPSA  
PO Box 309  
Blacksburg, VA 24063

- Check here if you need a receipt sent back  
to you by  e-mail,  mail or  fax.

**Membership Dues (Starts May 1)**  
\$50.00 – Member (12 months)  
\$25.00 – Student\* (12 months)

*\*Must be full-time student to be eligible*

For additional information, please contact CPSA by email at dewk@vt.edu, by phone at (540) 231-7055 or by fax at (540) 231-4070.