

ARC Network BASIC Membership Application Form

Please print this form, complete the information requested and mail to the address
at the bottom of this page or FAX to (858) 618-1088

First Name: _____ Last Name: _____ M. Initial: _____

Mailing Address: _____

City: _____ State/Province: _____ Zip Code: _____

Company Name: _____

Title (ex. Accident Reconstructionist, Engineer, Traffic Investigator, etc.): _____

Service Areas (please list if you do business in other states): _____

Phone: _____ Fax: _____

Email Address: _____

Specialties: _____

Web Site Address: <http://>_____

How did you hear about the ARC Network? _____

ACTAR Certified? YES NO

PAYMENT INFORMATION

Check Number: _____ \$49 ANNUAL DUES (no charge for the first two states)

(Discounts?)

Type of Card (please circle): VISA or MASTERCARD \$5 FOR EACH ADDITIONAL STATE

Credit Card Number: _____

Credit Card Expiration Date: _____ Name on Credit Card: _____

INSTRUCTIONS: In order to process and qualify your application for membership please include the following on a floppy disk:

- Current copy of Curriculum Vitae (professional resume)
- Picture of Company Logo (this is optional) If you don't have an electronic graphic, you can include a picture and we will scan it for you
- Short Bio (1-2 paragraphs) Please type this in Microsoft Word, WordPerfect or a text editor.

Mail or FAX this application along with the required info (located in the box to the left) and the yearly dues to the following address:

The ARC Network
11650 Iberia Place, Suite 201
San Diego, CA 92128
Fax: (858) 618-1088

If you are Faxing your application, please email us the required info in the box to the left at service@accidentreconstruction.com

After review by the membership committee you will be notified of your membership status and your membership package will be sent to you.

I certify the above information is true, correct and complete to the best of my knowledge. I authorize the ARC Network to verify the above information and charge my credit card (if paying by credit card).

Applicant Signature

Date