



# NJPEC

# MEMBERSHIP APPLICATION

## APPLICANT INFORMATION

Prefix: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Company/Organization: \_\_\_\_\_

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

Work Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_

Work Email: \_\_\_\_\_

Home Email: \_\_\_\_\_

Website: \_\_\_\_\_

Work Address: \_\_\_\_\_

Home Address: \_\_\_\_\_  
(Street Address) (City) (State) (Zip Code)

## PACKAGING BACKGROUND

Please indicate your primary responsibilities and qualifications.

Years in Packaging Industry: \_\_\_\_\_

Membership Category:    User            Supplier            Education\Student            Other

## PROFESSIONAL INTEREST AREAS

Please list three areas of interest (with the first as your primary) to help us target member benefits to your professional interest (Examples include: Package Engineering, Creative Packaging, Sales/Sales Management, Package Design, Machinery, Education, etc.)

- 1.
- 2.
- 3.

State briefly why you desire to become an NJPEC Member.

## AGREEMENT

To the NJPEC Board of Trustees:

I, \_\_\_\_\_, am a packaging professional who has primary employment, does business, and/or has a residence in New Jersey, hereby apply to become a member of the New Jersey Packaging Executives Club.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

The following NJPEC Membership Sponsors are familiar with my qualifications.

\_\_\_\_\_  
Sponsor 1

\_\_\_\_\_  
Sponsor 2

Please submit the completed application and Membership Dues to the NJPEC Membership Chairperson.  
The completed application can be emailed to [efischbein@justpackaging.com](mailto:efischbein@justpackaging.com).  
Membership Dues can be paid on-line by clicking [Membership Dues Payment](#).