

Date \_\_\_\_\_

**ASSOCIATION FOR FACILITIES ENGINEERING**

Organizational Chapter Survey

\_\_\_\_\_ Yes, I am interested in attending the organizational meeting to hear more about how the chapter will benefit me as a facilities engineer

\_\_\_\_\_ Yes, I am interested in attending the meeting and would be interested in serving on the planning committee

\_\_\_\_\_ I am interested in actively participating in the chapter but cannot attend the meeting. Please continue to send me chapter information

\_\_\_\_\_ No, I am not interested in participating in a local AFE chapter at this time

**Please list below the benefits/educational programs/activities you would expect to find from an AFE chapter**

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Are you a current member of AFE:	_____	Yes	_____	No
Have you ever been a member of any AFE chapter:	_____	Yes	_____	No
If not a member, would you like to receive information:	_____	Yes	_____	No

**Please fill out the information below:**

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

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**Please return via fax/email to** \_\_\_\_\_

**At fax/email address** \_\_\_\_\_