



## 2024-2025 Membership Application

When you apply for ACEC WI membership, you are also applying for membership with the national ACEC organization. We will forward your completed application to that office.

Submit completed application to ACEC WI: 316 W. Washington Ave, Suite 950 | Madison, WI 53703  
(608) 257-9223 | [acecwi@acecwi.org](mailto:acecwi@acecwi.org) | [www.acecwi.org](http://www.acecwi.org)

### FIRM INFORMATION

Firm Name: \_\_\_\_\_

Firm Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

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

### Key Contact

The primary contact for all ACEC WI matters including special correspondence, voting, etc.

Name: \_\_\_\_\_ Email: \_\_\_\_\_

### BRANCH OFFICES IN WISCONSIN

*If there are additional offices in Wisconsin, please list them. Use additional sheets if necessary.*

Firm Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

### TOTAL NUMBER OF FULL TIME PERSONNEL (include all support staff)

\_\_\_\_\_ In Wisconsin offices

\_\_\_\_\_ In all offices company-wide (including WI)

**BUSINESS ORGANIZATION**

- Privately Owned Corp
- Publicly Owned Corp
- Limited Liability Corp
- S Corporation
- Joint Venture
- Partnership
- Limited Partnership
- Sole Proprietor

**MINORITY STATUS**

- Disadvantaged Business Enterprise
- Minority Business Enterprise
- Service-Disabled Veteran Owned Business
- Woman's Business Enterprise
- Not Applicable

**FIRM DESCRIPTION** (50 word description of your firm's activities for website directory)

**WISCONSIN PRINCIPALS** (List all principals in state. Use additional sheets if necessary.)

NAME	TITLE	PE REG. #	WORK CITY	EMAIL

**FIRM SERVICES PROVIDED** (check all that apply)

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Acoustical/Air/Noise/Vibration      | <input type="checkbox"/> Computer Applications                      | <input type="checkbox"/> Mechanical               |
| <input type="checkbox"/> Agricultural/Biological Engineering | <input type="checkbox"/> Construction Management                    | <input type="checkbox"/> Mining                   |
| <input type="checkbox"/> Architectural                       | <input type="checkbox"/> Fire Protection/Hazardous Materials/Safety | <input type="checkbox"/> Nuclear/Petroleum/Energy |
| <input type="checkbox"/> Chemical                            | <input type="checkbox"/> Electrical                                 | <input type="checkbox"/> Planning                 |
| <input type="checkbox"/> Civil, Environmental                | <input type="checkbox"/> Environmental                              | <input type="checkbox"/> Surveying/GIS/Mapping    |
| <input type="checkbox"/> Civil, General Municipal            | <input type="checkbox"/> Forensic Engineering                       | <input type="checkbox"/> Utilities/Energy         |
| <input type="checkbox"/> Civil, Geotechnical                 | <input type="checkbox"/> Hazardous Waste                            | <input type="checkbox"/> Water/Wastewater         |
| <input type="checkbox"/> Civil, Structural                   | <input type="checkbox"/> Hydrology/Hydrogeology                     | <input type="checkbox"/> Other _____              |
| <input type="checkbox"/> Civil, Transportation               | <input type="checkbox"/> Industrial                                 |   |
| <input type="checkbox"/> Cogeneration                        | <input type="checkbox"/> Land Development                           |   |
| <input type="checkbox"/> Communications                      | <input type="checkbox"/> Materials                                  |   |

**REASONS FOR JOINING ACEC WI** (check all that apply)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> ACEC National Membership | <input type="checkbox"/> Committee Involvement        | <input type="checkbox"/> Liaison with state agencies |
| <input type="checkbox"/> Advocacy/Representation  | <input type="checkbox"/> Continuing Education         | <input type="checkbox"/> Networking                  |
| <input type="checkbox"/> Business Insurance Trust | <input type="checkbox"/> Health Insurance             | <input type="checkbox"/> Retirement Trust            |
| <input type="checkbox"/> Business Opportunities   | <input type="checkbox"/> Industry insider information | <input type="checkbox"/> Other _____                 |

**STATE AGENCY WORK** (check all that apply)

*The agency key contact will be kept up-to-date with relevant agency issues.*

- |   |               |
|---|---------------|
| <input type="checkbox"/> Dept. of Transportation        | Name: _____   |
|   | Email: _____  |
| <input type="checkbox"/> Dept. of Natural Resources     | Name: _____   |
|   | Email: _____  |
| <input type="checkbox"/> Div. of Facilities Development | Name: _____   |
|   | Email: _____  |
| <input type="checkbox"/> Other (please specify)         | Agency: _____ |
|   | Name: _____   |
|   | Email: _____  |
| <input type="checkbox"/> Does not apply                 |               |

**INFORMATIONAL EMAILS**

*List the names of staff members who should receive the monthly ACEC WI e-newsletter and weekly event email blasts.*

NAME	EMAIL	WORK CITY

**MEMBERSHIP REQUIREMENTS**

Member Firms shall be limited to those individual firms, parent firms, branch offices, divisions or subsidiaries whose resident principals (proprietors, partners, officers or managers having an ownership interest or exercising management responsibilities for technical or business decisions) furnish independent consulting engineering services, and shall:

- a) Maintain and have established an office(s) in the State of Wisconsin for the practice of consulting engineering, either as (i) sole proprietorships, or (ii) partnerships, or (iii) as corporations or divisions or subsidiaries furnishing consulting engineering services, provided that their officers act for them on professional policies and activities;
- b) Have principals registered or licensed professionally in accordance with the laws of the State of Wisconsin;
- c) Practice consulting engineering in accordance with the American Council of Engineering Companies and ACEC of Wisconsin Bylaws and the Statement of Professional and Ethical Conduct Guidelines;
- d) Conduct its practice under an organizational arrangement that does not involve a conflict of interest or does not subordinate independent professional judgment to other considerations. Firms or corporations, wholly or partially owned by commercial, or construction contracting, manufacturing, sales, public utility, holding company or similar organizations which functions exclusively as service organizations for the controlling company, shall not be eligible for membership if such ownership arrangement prejudices or subordinates the professional or ethical judgment of the consulting engineers; and
- e) Be a member of the American Council of Engineering Companies.

**2024-25 DUES INFORMATION**

American Council of Engineering Companies of Wisconsin (ACEC WI) and American Council of Engineering Companies (ACEC) annual dues/assessments are based on an index number, which is determined by the total number of personnel employed by the firm including all principals, engineers and support staff. For fiscal year 2024-2025, ACEC WI dues are \$643.47 per index number and ACEC dues/assessments are \$457.47 per index number [\$587 for single person firms]. Please contact ACEC WI to determine your firm’s index number and dues for the year. For firms joining after the start of the fiscal year (July 1), dues are prorated. Previous ACEC WI members are eligible for the discount if the firm has not been a member in the last five years and the firm left the organization in good standing. Dues will be billed after the application is approved.

Contributions or gifts to ACEC WI and ACEC are not deductible as charitable contributions for federal income tax purposes, but dues payments may be deductible as an ordinary and necessary business expense subject to restriction imposed because of association lobbying activities.

**MEMBERSHIP SUBMISSION**

I have read the qualifications for membership above and believe this firm meets the requirements. I certify that the information I have submitted on this application is correct to the best of my knowledge. If this application is approved, I agree the firm will uphold the bylaws of the American Council of Engineering Companies of Wisconsin and the American Council of Engineering Companies.

Principal Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date \_\_\_\_\_