BICSI Individual Membership ApplicationReturn completed form to the BICSI SEA office: 29-1, Jalan Pju 1/3F Sunwaymas Commercial Center, 47301 Petaling Jaya, Malaysia Website: bicsi-sea.org Tel: +6019-838 0628 Email: info@bicsi-sea.org



Last name	First name	Middle initial			Job title		
Member/Customer number (if applicable)		Year of Birth (Optional)			Gender (Male/Female) (Optional)		
How did you hear about BICSI?							
Company name		Compan	y website				
Business address		Street or	P.O. box				
City	y Sta		state/Province 2		ode	Country	
Home address	Street or		P.O. box			Apartment number	
City		State/Province		Zip/Postal c	ode	Country	
Daytime phone	Cellphone	Email		il			
	Tell	us m	ore abo	ut you			
What is your education				_	ompany Numb	er of employees (include all sites)	
☐ High School or Equivalent☐ 2-Year Degree	☐ Undergraduate Degree☐ Graduate Degree	ee		□ 1-24 □ 25-49	□ 50-99 □ 100-499	□ 500-999 □ 1,000 or more	
Which subcated	gory most closely de	escribes	your curre	nt primary jo	b descriptio	on? (Choose one)	
Construction ☐ Technician/Installer ☐ Audio/Visual Integrator ☐ Building Systems Integrator ☐ Electrical Contractor ☐ General Contractor and/or Construction Manager ☐ Security Contractor ☐ Project Manager ☐ ICT Contractor ☐ Mechanical Contractor ☐ Real Estate Developer Design	☐ Consultant ☐ Professional Engineer Education & Trainin Providers ☐ On Staff at CEC/Exam T Partner ☐ On Staff at an Authorize Training Facility ☐ On Staff at CEC/Training Provider Partner ☐ Member of Faculty at a College/University ☐ Member of Faculty at a High School	ing □ On Staff of Organization □ On Staff of Organization □ On Staff of Organization □ On Staff of □ CT Consur □ Facility Mare □ On Staff at Service Pro □ On Staff at □ Data Center		a Standards Body/ in a Trade Group mers nager twork Operator a CATV/Broadband vider a CLEC/BLEC	Depai Work Carrie Meml the M Work Provie Secur On St Opera Supply Work Work	 □ Work in a Corporate IT Department □ Work for Local Exchange Carriers □ Member or Civilian Staff of the Military □ Work for a Network Service Provider □ Security Manager □ On Staff of a Wireless Operator Supply Chain □ Work for an ICT Distributor □ Work for an ICT Manufacturer □ Manufacturer's Representative 	
□ Designer□ Architect	☐ Member of Faculty at	☐ Work for the ICT Capacity		e Government in an Y		tacturer's Representative for an ICT Testing Lab	

Individual Membership Pricing



Membership Options (Visit bicsi.org for a full list of membership benefits.)

Individual Membership is held in the name of the individual and is nontransferable. Discounted rates are available for multi-year memberships.

Special Membership rate is available active-duty military (for countries that are applicable), for senior individuals, and BICSI-Certified Installers and Technicians. (Note: Installers and Technicians holding the RCDD credential do not qualify for this membership level.) Documentation must be provided as follows:

Active-duty military personnel: Active Duty Military personnel must submit a copy of their DL or state ID AND a copy of active military orders OR Military Leave and Earnings Statement (LES).

Senior individuals: Must be age 62 or older and submit proof of age. Proof of age may be any valid form of ID that indicates name and year born.

Student Membership is for full-time students, and they must submit a photocopy of a student ID card and a copy of a current transcript or course schedule. Student memberships shall not count toward the achievement of district or region status and will not have voting rights but are eligible for membership benefits made available to BICSI members from time to time.

Apprentice Membership requires proof of attendance at an Accredited Apprenticeship program for each year of membership from the apprentice. The stated proof will be a letter from the licensed apprenticeship program's training director and will need to contain certification dates of when the apprentice entered into the program and when they expect to turn out.

Member Pricing Structure

All prices are listed in U.S. dollars. To determine your membership cost, please locate the country you currently reside in from the listing below. Country will be verified, and dues may be amended accordingly. Then determine the length and type of membership you are selecting. Enter the appropriate cost on page 4 of the application.

Tier 1	Individual	Individual	Individual	Special Membership
	1-Year	2-Year	3-Year	1-Year
	\$199	\$359	\$514	\$119

Brunei Darussalam Singapore

Tier 2	Individual	Individual	Individual	Special Membership
	1-Year	2-Year	3-Year	1-Year
	\$149	\$264	\$374	\$94

Lao's People's Democratic Republic Malavsia

Thailand

Tier 3	Individual	Individual	Individual	Special Membership
	1-Year	2-Year	3-Year	1-Year
	\$114	\$194	\$274	\$79

Cambodia Indonesia Myanmar Philippines Timor-Leste Vietnam

Individual Membership



Date signed

BICSI Code of Ethics and Professional Obligations

All members and/or credential holders are required to adhere to the current BICSI Code of Ethics and Professional Obligations, which terms are incorporated herein by reference. A violation of the Code of Ethics and Professional Obligations may subject the individual to disciplinary action up to loss of membership and/or revocation of their credentials.

Privacy Policy

Print name

To learn more about BICSI's Privacy Policy, visit bicsi.org/privacy-policy.

Read the full Code of Ethics here:

https://www.bicsi.org/about-us/about-bicsi/corporate-responsibility/ethics/code-of-ethics-professional-obligations

By signing, I am confirming that I have read the BICSI Code of Ethics and Professional Obligations (visit bicsi.org/ethics) and agree to adhere to them (required for membership to be processed).	

Signature

BICSI Offices



Worldwide Headquarters

8610 Hidden River Pkwy
Tampa, FL 33637-1000 USA
Tel: +1813.979.1991 or
800.242.7405 Fax: +1813.971.4311
Email: bicsi@bicsi.org
Web: bicsi.org

BICSI Affiliates

CALA

Individual

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Costa del Este, Ave. Centenario, PH Dream Plaza, 10th Floor, Panama City, Panama, Zip 07173 Tel: +5073108364 Email: info@bicsi-cala.org Web: bicsi-cala.org

India

BICSI India Office 2nd & 3rd Floors, Suprabhatha Commerical Complex,

6th Main, TC Palya Main Road, Hoysalanagar,
Bangalore-560016, India
Tel(1): +91-70229 95758
Tel(2): +91-98806 55448
Email: info@bicsi-india.org
Web: bicsi-india.org

Japan

Web: bicsi.jp

BICSI Japan Office Sagami Bldg. 2nd floor, 7-13-6 Ginza Chuo-ku Tokyo 104-0061 Japan Tel: +81 3 3524 8488 Email: bicsi-japan@bicsi.jp

Special Membership Rate

□ 1year \$_____

Southeast Asia

BICSI Southeast Asia 29-1, Jalan PJU 1/3F Sunwaymas Commercial Center Petaling Jaya, Selangor 47301 Selangor/Malaysia Tel: +6019-838 0628 Email: info@bicsi-sea.org Web: bicsi-sea.org

South Pacific

BICSI South Pacific Office PO Box 1018 South Melbourne, Victoria, 3205, Australia Phone: 1800-306-444

Email: info@bicsi.com.au
Web: bicsi.com.au

Ready to become a member?

Type of Membership (See page 2 for membership options and pricing.)

Please check membership and term desired and fill in membership fee based on country of residence (see page 2). Discounts are provided for multiple-year Individual Memberships.

□ 2 years \$		Documentation Required (see	e page 2).		
□ 3 years \$					
Membership fees are sul nontransferable per Byla	bject to change wit w sections 5.4 and	hout notice. Memberships are b	pased on a 12-month cycle a	- ·	egulations duly established by the BICSI Board of Directo join date. Memberships are nonrefundable and ness expenses.
card, please mail o	or fax your pay	not accept emailed crec yment information inste ments to the appropriate	ad. Residents in an		Telegraphic Transfer Information BENEFICIARY NAME: TECNOVIQ LEARNING ACADEMY SDN. BHD BENEFICIARY ACCOUNT NUMBER: 232-9015-531 (USD) BENEFICIARY CONTACT NUMBER: 03-7887 7803 BANK NAME: LUNITED OVERSEAS BANK (MALAYSIA) BHD BANK ADDRESS: 2-6, JALAN TENGAH, 46200 PETALING JAYA, SELANCOR, MALAYSIA. SWIFT CODE: JUOYBMYKLXXX
Total to be paid \$	☐ Telegra ☐ Visa	aphic Transfer □ MasterCard	Diner's Club	Discover	BENEFICIARY ADDRESS: 29-1, JALAN PJU 1/3F, SUNWAYMAS COMMERCIAL CENTRE, 47301 PETALING JAYA, SELANGOR.
Cardholder name (a	as the name ap	ppears on the credit card)			Cardholder signature
Credit card number			CVV	Expiration date	Card billing zip code (required)