

# APHA AGENCY AND COMPANY & CONSULTANT MEMBERSHIP APPLICATION



## THE AMERICAN PUBLIC HEALTH ASSOCIATION

Champions the health of all people and all communities. We are the only organization that combines a 150-year perspective, a broad-based member community and the ability to influence federal policy to improve the public's health.

## AGENCY MEMBERSHIP

Agency membership is open to academic institutions, federal, state and local governments and nonprofit non-governmental organizations engaged in public health work or having a close relationship to health services.

## COMPANY & CONSULTANT MEMBERSHIP

Company & Consultant membership is open to companies, corporations, consultants and others engaged in public health work or having a close relationship to health services.

## MEMBER BENEFITS

- Discounted registration to the APHA Annual Meeting and Expo (all employees eligible)
- Up to 15% discount on a booth at APHA's Annual Meeting and Expo
- 50% discount on print recruitment ads in the **American Journal of Public Health** and **The Nation's Health**
- Up to 30% discount on Public Health CareerMart job postings
- Up to 30% discount on publications at APHA Press (all employees eligible)
- Recognition on APHA website
- Organization becomes part of Generation Public Health©
- Online access to **The Nation's Health** for employees who register
- Discounted individual membership rate for your employees, which gives them full membership benefits

## JOIN TODAY!

COMPLETE THE MEMBERSHIP APPLICATION AND RETURN IT VIA:

MAIL      APHA  
             800 I St. NW  
             Washington, DC 20001

FAX      202-777-2520  
EMAIL   membership.mail@apha.org

## QUESTIONS ABOUT APHA?

Contact us at **202-777-2400** or **membership.mail@apha.org**.

**For more information, please visit [www.apha.org](http://www.apha.org).**

# APHA AGENCY AND COMPANY & CONSULTANT MEMBERSHIP APPLICATION

## ORGANIZATION TYPE

- ☐ Academic Institution ☐ Nonprofit Non-Governmental Agency  
☐ State, Local or Federal Government Agency ☐ Company or Consultant

## FOR OFFICE USE ONLY

SOURCE CODE \_\_\_\_\_

MEMBER ID \_\_\_\_\_

## MISSION STATEMENT

\_\_\_\_\_  
\_\_\_\_\_

- ☐ Agency is EEO/AA compliant (please initial to confirm) \_\_\_\_\_

## CONTACT INFORMATION

Organization \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Website \_\_\_\_\_ Main Phone \_\_\_\_\_

Liaison Name\* \_\_\_\_\_ Liaison Phone \_\_\_\_\_

Liaison Email \_\_\_\_\_

Facebook \_\_\_\_\_ Twitter \_\_\_\_\_ LinkedIn \_\_\_\_\_

\* Correspondence will be sent to the Liaison.

The liaison will also receive the agency's code to give to employees for use in joining/renewing individually online.

## ANNUAL MEMBERSHIP DUES (DUES ARE ASSESSED ANNUALLY)

| Organization Size     | (Approx. Number of Employees) | Agency                           | Company or Consultant             |
|-----------------------|-------------------------------|----------------------------------|-----------------------------------|
| 1 - 20 employees      | _____                         | <input type="checkbox"/> \$525   | <input type="checkbox"/> \$1,575  |
| 21 - 100 employees    | _____                         | <input type="checkbox"/> \$790   | <input type="checkbox"/> \$2,365  |
| 101 - 200 employees   | _____                         | <input type="checkbox"/> \$1,050 | <input type="checkbox"/> \$3,150  |
| 201 - 300 employees   | _____                         | <input type="checkbox"/> \$1,315 | <input type="checkbox"/> \$3,940  |
| 301 - 400 employees   | _____                         | <input type="checkbox"/> \$1,575 | <input type="checkbox"/> \$4,725  |
| 401 - 500 employees   | _____                         | <input type="checkbox"/> \$1,840 | <input type="checkbox"/> \$5,515  |
| 501 - 750 employees   | _____                         | <input type="checkbox"/> \$2,625 | <input type="checkbox"/> \$7,875  |
| 751 - 1000 employees  | _____                         | <input type="checkbox"/> \$3,415 | <input type="checkbox"/> \$10,240 |
| 1001 - 4999 employees | _____                         | <input type="checkbox"/> \$4,200 | <input type="checkbox"/> \$12,600 |
| 5000+ employees       | _____                         | <input type="checkbox"/> \$5,500 | <input type="checkbox"/> \$16,500 |

## PAYMENT INFORMATION

- ☐ CHECK  
(make check payable to APHA—U.S. dollars only)

MAIL TO:

APHA  
Attn: Accounts Receivable  
800 I St. NW  
Washington, DC 20001-3710

- ☐ AMERICAN EXPRESS ☐ DISCOVER ☐ MASTERCARD ☐ VISA

Once your membership application has been approved, you will receive an email with information on how to pay by credit card. If you have questions, please call 202-777-2400.