



### Mission Statement

"...to advance the environmental health and protection professional for the purpose of providing a healthful environment for all."

# NEHA Individual Membership Application Form

## Section 1: MEMBER CONTACT INFORMATION

Title: ☐ Mr ☐ Mrs ☐ Miss ☐ Ms

Full Name: \_\_\_\_\_

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

Position title: \_\_\_\_\_

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

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

Daytime Phone: \_\_\_\_\_ Email address: \_\_\_\_\_ Fax: \_\_\_\_\_

## Section 2: MEMBERSHIP TYPE AND PAYMENT DETAILS

Member Type	Description	Membership Dues	Please Check	Member Type	Description	Member Dues	Please Check
1 year	E-Journal only	\$95.00	<input type="checkbox"/>	* 1 year	Student E-Journal	\$15.00	<input type="checkbox"/>
1 year	E-Journal & Print	\$110.00	<input type="checkbox"/>	* 1 year	Student E-Journal & Print	\$55.00	<input type="checkbox"/>
2 year	E-Journal only	\$180.00	<input type="checkbox"/>	1 year	Retired E-Journal	\$15.00	<input type="checkbox"/>
2 year	E-Journal & Print	\$210.00	<input type="checkbox"/>	1 year	Retired E-Journal & Print	\$55.00	<input type="checkbox"/>
3 year	E-Journal only	\$255.00	<input type="checkbox"/>	1 year	International	\$60.00	<input type="checkbox"/>
3 year	E-Journal & Print	\$300.00	<input type="checkbox"/>	* 1 year	Graduate E-Journal	\$15.00	<input type="checkbox"/>
				* 1 year	Graduate E-Journal & Print	\$55.00	<input type="checkbox"/>

Section 3: PAYMENT METHOD ☐ Institutional Check ☐ Personal Check ☐ Credit Card

Credit Card: \_\_\_\_\_ Please Check: ☐ VISA ☐ MasterCard ☐ American Express

Card #: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ CVV: \_\_\_\_\_

Signature: \_\_\_\_\_

**Note:** \* **Student:** Please send proof of fulltime student status. Eligible documents: Student ID, class schedule or unofficial transcript  
Minimum 12 hours per semester required

\* **Graduate:** Must be within 1 year of official graduation date

## Section 4: Send to:

National Environmental Health Association  
720 S. Colorado Blvd., Ste. 1000-N  
Denver, CO 80246-1925  
Phone: 303.756.9090 Fax: 303-691-9490  
[staff@neha.org](mailto:staff@neha.org) [www.neha.org](http://www.neha.org)

## Section 5: Demographics

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ Male ☐ Female

Area of expertise in environmental health: \_\_\_\_\_

## Section 6: How did you hear about us?

- ☐ A colleague or friend  
☐ Social Media (Facebook/LinkedIn/twitter)  
☐ Website  
☐ Other: \_\_\_\_\_