

APHA Agency Membership Application

American Public Health Association

We champion the health of all people and all communities. We are the only organization that influences federal policy, has a 145-plus year perspective and brings together members from all fields of public health.

Agency Membership – Nonprofit

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

Agency Membership – Other

Agency membership is open to companies engaged in public health work or other programs having a close relationship to health services not defined in the nonprofit category.

Agency member benefits

- 50% discount on classified ads in the American Journal of Public Health and The Nation's Health
- Discounted registration to the APHA Annual Meeting and Expo (all employees eligible)
- Up to 30% discount on publications at APHA Press (all employees eligible)
- Agency members to receive 50% discount on print recruitments and approximately 30% discount on Public Health CareerMart job postings
- One copy of AJPH (for designated representative)
- One online password to The Nation's Health (for designated representative)
- Online access to The Nation's Health for agency representatives that set up an account
- Increase hard copies of The Nation's Health to 1 per 100 agency members
- 20% discount off AJPH (all employees eligible)
- Agency to receive recognition on APHA website
- Agency may post organizations meetings & events on APHA events page
- Agency becomes part of Generation Public Health©
- 10% off booth at APHA's Annual Meeting and Expo (eligible for new agency members only)

Ready to join?

Complete the Agency membership application and return via mail it to:

American Public Health Association

Attention: Membership

800 I St. NW

Washington, DC 20001-3710

Or return via fax to (202) 777-2520 or email to membership.mail@apha.org

Questions about APHA?

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

American Express

Credit Card Number

Cardholder's Signature

Expiration Date

APHA AGENCY MEMBER	RSHIP APPLICATION				
Organization type Academic Institution State, Local and Federal Government Agency Nonprofit Non-Governmental Agency		AMERICAN PUBLIC HEALTH ASSOCIATION For science. For action. For health. For office use only Promo code			
			Other		
			Mission Statement:		
Agency is EEO/AA compliant (plea	se check to confirm)				
Company information					
Organization					
Mailing address		_			
City	State	ZIP			
Website	Main phone				
 Liaison	·				
Liaison Email					
Liaison Phone	Fax				
* Correspondence will be sent to the Compuse in joining/renewing individually online		the agency's promotional code to give to employees for			
Company size/Annual Agen	cy Membership dues (dues	s are assessed annually)			
Agency Size	Non-Profit	<u>Other</u>			
1-20 employees	\$500	\$1,500			
21-100 employees	\$750	\$2,250			
101-200 employees	\$1,000	\$3,000			
201-300 employees	\$1,250	\$3,750			
301-400 employees	\$1,500	\$4,500			
401-500 employees	\$1,750	\$5,250			
501-750 employees	\$2,500	\$7,500			
751-1000 employees	\$3,250	\$9,750			
1001+ employees	\$4,000	\$12,000			
Individual dues					
Agency members are eligible to rece	eive a discount on individual dues.	For more information please contact Nancy			
Sherwood at 202-777-3914 or nand	cy.sherwood@apha.org.				
Payment information					
Check (payable to APHA)					

NOTE: Agency membership applications must be approved by the APHA Executive Board (per bylaw requirements), which convenes six times annually. Please allow up to 10 weeks for approval process.

Discover

MasterCard

Visa