APHA AGENCY AND COMPANY & CONSULTANT MEMBERSHIP APPLICATION

APHA
AMERICAN PUBLIC HEALTH ASSOCIATION
For science. For action. For health.

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@apha.org

QUESTIONS ABOUT APHA?

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

For more information, please visit apha.org.

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ORGANIZATION TYPE

- ☐ Academic Institution
- ☐ State, Local or Federal Government Agency
- ☐ Nonprofit Non-Governmental 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 (ASSESSED ANNUALLY)

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

PAYMENT INFORMATION

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

MAIL TO:

APHA
Attn: Accounts Receivable
800 I Street 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.

06/2024