AIHA
HEALTHIER WORKPLACES | A HEALTHIER WORLD

2021 Emeritus Membership Form

Only for AIHA Members in Good Standing Upon Retirement.

MAIL TO:
AIHA
PO BOX 1519
Merrifield, VA 22116-9990

FAX TO:
1-703-207-3561

General Information

FIRST NAME | MI | LAST NAME | SUFFIX (Sr., Jr.)

TITLE

COMPANY NAME

STREET ADDRESS | SUITE/APT

CITY | STATE/PROVINCE | ZIP/POSTAL CODE | COUNTRY

PREFERRED PHONE ❑ MOBILE ❑ HOME ❑ BUSINESS

WORK EMAIL

PERSONAL EMAIL

❑ MALE ❑ FEMALE

DATE of BIRTH | SEX | YEAR YOU ENTERED OEHS PROFESSION

CERTIFICATIONS HELD | DESIGNATIONS HELD

❑ YES ❑ NO

I HAVE a DEGREE in Industrial Hygiene, Chemistry, Physics, Engineering or Biology | OTHER DEGREE(S) HELD (please specify)

Payment Information

❑ Emeritus Membership $111

Optional Items

❑ JOEH print Subscription $66
(online access is included with membership)

AIHA Local Section
_____ . . . . . $_____

AIHA Virtual Section
($25 annually) . . . . . $_____

Contribution to AIHF . . . . . $_____

Contribution to
Guideline Foundation. . . . . $_____

TOTAL AMOUNT DUE . . . . . $_____

Method of Payment

AIHA Employer ID (EIN): 38-1618683. AIHA is not able to accept purchase orders and bank transfers. Please check one of the following:

❑ Check payable to AIHA
❑ VISA ❑ MasterCard ❑ American Express

CREDIT CARD NUMBER

EXPIRATION DATE | CVV#

NAME ON CARD

SIGNATURE

Due to security purposes, credit card information can only be accepted via fax at 1-703-207-3561 or by mail.

Additional Information

❑ I am fully retired ❑ I am semi-retired.

❑ I give AIHA national consent to share my contact information with the AIHA Local Section within my region.

Confirmation and Receipt
A confirmation will be emailed once payment is received and processed. A copy of your receipt is also available via the "My Member Dashboard" link located in the Member Center at www.aiha.org.

Member Affirmation
AFFIRMATION: I verify that the information herein is true and accurate and that I meet the eligibility requirements for Emeritus members. Further, I agree to comply with the Member Ethical Principles and the Member Code of Conduct.

Signature: _____

Email Opt-In ❑ Yes or ❑ No
In compliance with the General Data Protection Regulation, AIHA is requesting your express consent to communicate with you electronically regarding activities which can be characterized as commercial, such as announcements regarding AIHA's annual meeting, membership renewal, benefits of membership, publications and other items for sale, etc., whether we send those messages directly or include them in electronic publications such as emails or newsletters. This consent will apply to AIHA, the American Industrial Hygiene Foundation, the AIHA Guideline Foundation and the Product Stewardship Society.

Signature: _____

AIHA Local Section Opt-In (additional fees apply)
Note: if your local section does not appear below, dues should be paid directly to the Local Section. Please do not submit to AIHA.

❑ Alabama $30
❑ Alamo $15
❑ Alberta $40
❑ Arizona $25
❑ Arkansas $20
❑ BC Yukon $35
❑ Carolinas $35
❑ Central New York $20
❑ Central Pennsylvania $20
❑ Chesapeake $25
❑ Connecticut River Valley $25
❑ Deep South $30
❑ Delaware $20
❑ Eastern New York $30
❑ Florida $25
❑ Georgia $20
❑ Gulf Coast $25
❑ Hawaii $20
❑ Idaho $25
❑ Illinois-Chicago $25
❑ Indiana $20
❑ Iowa-Illinois $25
❑ Kentuckiana $20
❑ Lehigh Valley $20
❑ Metro New York $35
❑ Mid-America $10
❑ Midnight Sun $10
❑ Nebraska/Western Iowa $25
❑ New England $35
❑ New Jersey $30
❑ North Texas $25
❑ Northern California $50
❑ Northwest Ohio $25
❑ Ohio Valley $30
❑ Oklahoma $30
❑ Orange County $40
❑ Pacific Northwest $35
❑ Philadelphia $25
❑ Pittsburgh $25
❑ Potomac $30
❑ Rio Grande $35
❑ Sabine Neches $25
❑ Sacramento Valley $40
❑ San Diego $40
❑ Southern California $50
❑ St. Louis $20
❑ Texas Coastal Bend $30
❑ Texas Hill Country $25
❑ Tidewater $15
❑ Upper Midwest $25
❑ Utah $35
❑ Western Mass. $20
❑ Western Michigan $30
❑ Western New York $25
❑ Wisconsin $25

AIHA Dues are not deductible as a charitable contribution for tax purposes but may be deductible as a business expense. AIHA estimates that 6% of your dues are not deductible because of AIHA's lobbying activities on behalf of its members. Please consult your tax advisor.