



2027 Membership Form

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

FIRST NAME	LAST NAME	GENDER
ORGANIZATION NAME		BIRTH YEAR
PREFERRED ADDRESS		CITY
STATE	ZIP/POSTAL CODE	COUNTRY
PHONE		EMAIL
YEAR ENTERED THE PROFESSION		CERTIFICATIONS/DESIGNATIONS HELD
HIGHEST DEGREE: ☐ BACHELORS ☐ MASTERS ☐ PHD		
☐ OTHER: _____		

For Current Students:

NAME OF UNIVERSITY/COLLEGE

☐ FULL TIME ☐ PART TIME

DEGREE GRADUATION YEAR/EXPECTED GRADUATION DATE

2027 Dues Categories and Rates*

☐ Full Membership	\$250
☐ Early Career Professional (up to 5 years in the profession)	\$120
☐ International Full Membership	\$56
☐ International Emerging Economies**	\$25
☐ Full Military/Public Health Service	\$120
☐ Early Career Military/Public Health Service	\$60
☐ Student***	No Fee

*For 2027, 7% of your membership dues is allocable to lobbying activities and is not deductible as a business expense for federal income tax purposes.

**For a list of countries qualifying for international emerging economies, go to <https://datatopics.worldbank.org/world-development-indicators/the-world-by-income-and-region.html>.

***All student members must submit verification of active student status with your application. Part-time student status is equivalent to one-half the credit hours of fulltime status based on your school's admission policy).

2027 Local Section Dues

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	☐ Delaware - \$20	☐ Metro New York - \$35	☐ Philadelphia - \$35	☐ Texas Hill Country - \$25
☐ Alamo - \$20	☐ Eastern New York - \$30	☐ Mid-American - \$10	☐ Pittsburgh - \$35	☐ Tidewater - \$15
☐ Alberta - \$40	☐ Florida - \$35	☐ Nebraska/Western Iowa - \$25	☐ Potomac - \$30	☐ Upper Midwest - \$25
☐ Arizona - \$40	☐ Georgia - \$30	☐ New England - \$35	☐ Puerto Rico - \$21	☐ Utah - \$35
☐ Arkansas - \$20	☐ Gulf Coast - \$35	☐ New Jersey - \$30	☐ Rio Grande - \$35	☐ Western Mass - \$25
☐ British Columbia Yukon - \$50	☐ Hawaii - \$30	☐ North Texas - \$25	☐ Rocky Mountain - \$30	☐ Western Michigan - \$30
☐ Carolinas - \$35	☐ Idaho - \$25	☐ Northern California - \$50	☐ Sabine Neches - \$25	☐ Western New York - \$25
☐ Central New York - \$20	☐ Illinois-Chicago - \$35	☐ Ohio Valley - \$30	☐ Sacramento Valley - \$40	☐ Wisconsin - \$30
☐ Chesapeake - \$25	☐ Indiana - \$30	☐ Oklahoma - \$30	☐ San Diego - \$40	
☐ Connecticut River Valley - \$30	☐ Iowa-Illinois - \$30	☐ Orange County - \$40	☐ Southern California - \$40	
☐ Deep South - \$30	☐ Keystone - \$25	☐ Pacific Northwest - \$50	☐ St. Louis - \$20	

AIHA Membership Dues: \$ _____

Optional Items

- ☐ JOEH print subscription (\$68)
- ☐ The Synergist print subscription (\$150)
The Synergist print subscription is included with purchase of Full Membership. You must have a US or Canada address on file to receive a copy.
- ☐ Contribution to the AIHA Foundation: \$ _____
- ☐ Contribution to the AIHA Guideline Foundation: \$ _____
- ☐ AIHA Local Section Dues (see below): \$ _____

TOTAL AMOUNT DUE: \$ _____

Method of Payment

AIHA EMPLOYER ID (EIN): 38-1618683.

AIHA cannot 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

- ☐ By checking this box, you agree to receive digital communications from AIHA. You can opt out at any time by clicking the link in our emails. For more information, please view our privacy policy (<https://www.aiha.org/about-aiha/aiha-policies/privacy-statement>)

MEMBER AFFIRMATION

I verify that the information herein is true and accurate. Further, I agree to comply with the Member Ethical Principles and the Member Code of Conduct.

SIGNATURE