



Membership Application 2010



ASSOCIATION
OF OCCUPATIONAL
HEALTH PROFESSIONALS
IN HEALTHCARE

Thank you for your interest in the Association of Occupational Health Professionals in Healthcare. The information you provide will be used to create the AOHP membership database. Include either your business or home address, wherever you prefer association mailings to be sent.

Please complete and mail this form with payment to: AOHP Headquarters, 109 VIP Drive, Suite 220, Wexford, PA 15090

Last Name: _____ First Name: _____ MI: _____

Credential: _____ Employer: _____

Title: _____ Dept: _____

Preferred mailing address: Home Business

Address: _____

City: _____ State: _____ Zip: _____

Home Ph: _____ Work Ph: _____ Fax: _____ E-mail: _____

MEMBERSHIP STATUS:

- Active: \$ 125 (may vote and hold office)
- Student: \$ 50 – must enclose copy of valid student I.D. (Minimum 9 credit hours related to occupational health; nonvoting and may not hold office)
- Retired: \$ 25 (previous active AOHP member; now non-working and retired; nonvoting and may not hold office)

The membership year is January 1 through December 31, 2010. By joining now, you get 15 months for the price of 12 months.

METHOD OF PAYMENT

- Check (make payable to AOHP)
 Credit Card: Visa MC American Express Discover

Card Number _____ Exp. Date _____ Cardholder Name _____

Card Billing Address _____ City _____ State _____ Zip _____

Contact Name and phone number if there are questions about credit card _____

Select Local Chapter: Please indicate your choice of chapter. If in doubt, please choose the closest chapter in your regions.

REGION 1

- Seattle, WA
- Portland, OR

California:
select Chapter

- Northern
- Southern
- Sierra Central

REGION 2

- Colorado
- Heart of America
- Houston Area
- Wisconsin

REGION 3

- Illinois
- Michigan
- Midwest States
- Virginia

REGION 4

- New England
- Maryland
- Nassau-Suffolk, NY

Pennsylvania:
select Chapter

- Central
- Eastern
- Southwest

REGION 5

- Alabama
- Florida
- Georgia
- North Carolina
- South Carolina

*You will receive a 2010 membership card once your application has been processed. Thank you for your support.
AOHP 2010 National Conference • September 15-18, 2010, Boston, MA*

