



AEHAP
ASSOCIATION OF ENVIRONMENTAL
HEALTH ACADEMIC PROGRAMS

Membership Application Form

Type of Membership Desired:

- EHAC Accredited Member (\$250)
- Associate Member (\$250) – non-accredited program interested in pursuing EHAC accreditation
- Affiliate Member (\$25) – for individuals interested in supporting AEHAP efforts

Please fill in the requested information and mail your application form, along with your check payable to AEHAP (or a copy of your institution's completed purchase order) to:

Association of Environmental Health Academic Programs
P.O. Box 66057
Burien, WA 98166

Your Name	Office Phone	
Title/Position	Fax	
College/University		
Program/Dept.		
City	State	Zip
Email	Website	
Volunteer Interest? (would like to serve on a committee, the AEHAP Board, etc.)		
How can AEHAP help your Environmental Health Program or Practice?		

P.O. Box 66057 Seattle, WA 98166
206-522-5272 FAX: 206-985-9805
www.aehap.org email: info@aeahp.org