



National Association of Environmental Professionals

Promoting excellence in the environmental profession.

MEMBERSHIP APPLICATION

First Name _____ MI _____ Last Name _____ Suffix _____

Company _____ Title _____

Address _____

City _____ State _____ Zip _____ Phone _____

Country _____ Fax _____ Email _____

Home Address _____

City _____ State _____ Zip _____ Phone _____

Country _____ Fax _____ Email _____

Mailing Preference Business Home

College/University _____ Degree(s) _____

Years of Environmental Work Experience _____ Area(s) of focus/specialty _____

AFFIRMATION:

I hereby affirm and agree that I will abide by the Code of Ethics and Standards of Practice of NAEP. I further understand that falsification of the contents of this application will be grounds for rejection and/or termination of my NAEP membership and revocation of all benefits resulting therein.

Signature _____ Date _____

o General Member - \$150/year

Available to individuals who have earned a baccalaureate or graduate degree employed in an environmental discipline for a minimum of 3 years.

o Associate Member - \$125/year

Available to individuals who do not meet the requirements for General membership.

o Senior Member - \$75/year

Available to individuals at least 65 years of age who are currently active in or retired from an environmental discipline.

o Spouse Member - \$65/year

Available to individuals whose spouse is a General member. Journal subscription not included.

o Student Member - \$40/year

Limited to full-time students. **A copy of a current transcript and a college identification must accompany this application.**

College/University _____

Expected graduation date _____

o Corporate Member – Primary Office - \$750

Available to the Primary Office of a corporation. This location will have a Primary Contact who must meet the requirements of a General Member.

o Corporate Member – Branch Office - \$375

Available to a Branch Office of a corporation with a current Primary Office membership. The Branch Office location will have a Primary Contact who must meet the requirements of a General Member.

Current Primary Office: _____

Attach a check for the above amount or provide your credit payment information below.

Credit Card No. _____

Expiration _____ V-Code _____

Name on card _____

Signature _____

