

# NEAAHP

Northeast Association of Advisors for the Health Professions

## Annual Membership Form 2010-2011

The annual individual membership dues for the period of July 1, 2010 through June 30, 2011 are \$35.00. Rights and privileges of membership in NEAAHP are specified in the NEAAHP constitution. Members will have access to all electronic resources of NEAAHP, including the NEAAHP listserv and the password protected page of NEAAHP's website ([www.neaahp.org](http://www.neaahp.org)). In addition, **new members will receive a complimentary copy of the latest edition of the *Premedical Advisor's Reference Manual* as a welcoming gift from NEAAHP.**

Duplicate this form for other personnel at your institution who wish to become members of NEAAHP. Only personal (i.e., no institutional) NEAAHP memberships are available. The Taxpayer Identification Number (TIN) for NEAAHP is 22-2535481. A full TIN form is available upon request.

Complete the information below – first, middle and last name, institution, address, telephone, fax, e-mail address, and the Local Area Network (LAN) affiliation. If you are not currently a member of a LAN, or are a new member of NEAAHP, write NEW in the space provided next to the appropriate LAN affiliation. **Feel free to attach your business card. However, if you do this, please still fill out your first, middle and last name.**

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last Name \_\_\_\_\_

Institution \_\_\_\_\_

Address \_\_\_\_\_

Are you a new member of NEAAHP? \_\_\_\_\_

Are you replacing another advisor? \_\_\_\_\_ If yes, who? \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

LAN Affiliation: Boston \_\_\_\_\_ Chesapeake (Balt & DC) \_\_\_\_\_ Metro NY \_\_\_\_\_

(Local Area Network) Philadelphia \_\_\_\_\_ Upstate New York \_\_\_\_\_ Western PA \_\_\_\_\_

**Please make checks or money orders payable to NEAAHP. No purchase orders or credit cards please.**

Total Enclosed \$ \_\_\_\_\_ (You will receive an email receipt – **PLEASE PRINT FOR YOUR FILES TO AVOID DUPLICATE PAYMENTS**)

**Annual Membership Form along with payment should be mailed to:**

David Thurlow, Treasurer, NEAAHP Chemistry Department Clark University 950 Main Street Worcester, MA 01610-1477	(Office) 508-793-7621 (Fax) 508-793-8861 Email: <a href="mailto:dthurlow@clarku.edu">dthurlow@clarku.edu</a>
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- Please consider the many benefits of joining the **National Association of Advisors for the Health Professions (NAAHP)**. If you are a new member of NEAAHP, and you also join NAAHP, your NEAAHP membership dues for your first year will be reduced to \$25. In this case, please include a copy of your membership receipt from NAAHP along with your NEAAHP Annual Membership Form. The NAAHP membership form is available at <http://www.naahp.org/membershipcentral.htm>.
- If you are a new member and if you are from a community college, please contact David Thurlow regarding membership.