

## 2018 New Member Application

1300 Wilson Blvd., Suite 300 • Arlington, VA 22209

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### US/CANADA

- Member/Fellow**.....\$265  
Individuals must hold advanced degrees in a healthcare field or specialized training in infection control or epidemiology. There is an application process to become a Fellow of SHEA. Contact [info@shea-online.org](mailto:info@shea-online.org) for more information. **(Voting member)**
- Member-in-Training (MIT)**.....\$115  
Individuals in a postdoctoral program in a field related to healthcare epidemiology. **(Non-voting member)**  
*Beginning & Ending Dates of Training (month/year)* \_\_\_\_\_  
*Name of Advisor* \_\_\_\_\_
- Emeritus Member/Emeritus Fellow**.....\$115  
Members/Fellows in good standing who have reached the age of 65 years, retired from active practice, or experienced a disability resulting in the cessation of professional activities. **(Non-voting member)**
- Associate Member**.....\$210  
Professionals interested in healthcare epidemiology, but not qualified for membership through other categories. **(Non-voting member)**
- Corporate Member**.....\$315  
Individuals employed in a business or industry related to the field of healthcare epidemiology. **(Non-voting member)**

### INTERNATIONAL

(Please see descriptions under US/Canada.)

- Member/Fellow**.....\$285
- Member-in-Training**.....\$180  
*Beginning & Ending Dates of Training (month/year)* \_\_\_\_\_  
*Name of Advisor* \_\_\_\_\_
- Emeritus Member**.....\$180
- Associate Member**.....\$225
- Corporate Member**.....\$370

### DEVELOPING NATION

(Please see descriptions under US/Canada.) The World Bank Global Economic Monitor identifies Developing Country status based on low or low-middle income classification. <http://data.worldbank.org/about/country-classifications>

- Member/Fellow**.....\$70
- Member-in-Training**.....\$70  
*Beginning & Ending Dates of Training (month/year)* \_\_\_\_\_  
*Name of Advisor* \_\_\_\_\_
- Emeritus Member (no Journal)**.....\$70
- Associate Member**.....\$70

### APPLICANT INFORMATION

**(PLEASE PRINT LEGIBLY)**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Full Name of Applicant

\_\_\_\_\_  
Degrees

\_\_\_\_\_  
Position

\_\_\_\_\_  
Institution/Organization

Mailing Address Type  Work  Home

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Suite

\_\_\_\_\_  
Department

\_\_\_\_\_  
City State Postal Code

\_\_\_\_\_  
Country

\_\_\_\_\_  
Office Phone Primary

\_\_\_\_\_  
Mobile Phone Primary

\_\_\_\_\_  
Fax

\_\_\_\_\_  
Email: (Primary) (Alternate)

\_\_\_\_\_  
Gender Birthday (00/00/0000)

\_\_\_\_\_  
Assistant Name {if applicable}

\_\_\_\_\_  
Assistant Phone {if applicable}

\_\_\_\_\_  
Assistant Email {if applicable}

**How were you introduced to SHEA?**

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**SHEA Monthly Journal: Electronic (developing nation) or Print Journal**  
**(CIRCLE ONE)**

