HPS **HEALTH PHYSICS SOCIETY**

950 Herndon Parkway, Suite 450 • Herndon, VA 20170
(703) 790-1745 • FAX: (703) 790-2672

2027 APPLICATION

☐ New
☐ Renewal

FOR AFFILIATE MEMBERSHIP

Please submit application to members@hps.org.

ORGANIZATION: _____

CONTACT: _____

PHONE: _____

EMAIL: _____

MAILING ADDRESS: _____

_____

_____

WEB SITE ADDRESS:_____

In the space below, provide a brief resume of your organization's radiation protection activities.
NOTE: ONLY NEW MEMBERS NEED TO PROVIDE THIS.

Application submitted by:

_____
Name

_____
Title

_____
Date

2027 AFFILIATE MEMBERSHIP

$390/calendar year per organization

Member Benefits:

- Members Only access for one Affiliate representative
- Monthly Journal, *Health Physics*
- Bimonthly online HPS newsletter, *Health Physics News*
- Discounted sponsorship opportunities for HPS events
- Exhibit booth space at HPS meetings at a lower rate than for nonmembers
- Exclusive discounts on banner advertising on HPS.org
- Discounts on advertising in *Health Physics News*
- Discounted advertising opportunities in *Health Physics* and on the HPS Facebook page
- Special listings in *Health Physics* and on HPS.org
- Listing on both the HPS Affiliates Page and the HPS Buyer's Guide
- Opportunity to send an email blast to HPS membership from HPS Headquarters*

* Subject to payment of service charges of $250 per email and approval of HPS business office. This is restricted to one Affiliate Member email blast per month and is not available the month of the HPS meeting. If two requests are received, the first one will be accepted; then the second will be sent the next month.

Preferred method of payment ☐ Company Check ☐ Credit Card

Upon receipt of this form, an invoice will be sent.
Please provide the name and email address where the invoice should be sent.

Name: _____

Email: _____

If paying by credit card, a secure payment link will be included.
All check payments must be made in US Dollars drawn on US Banks. If paying by check, make payable and mail to: Health Physics Society
950 Herndon Parkway, Suite 450
Herndon, VA 20170

HPS EXECUTIVE COMMITTEE APPROVAL:
(please initial and date)

PRESIDENT _____
PRESIDENT-ELECT _____
PAST PRESIDENT _____
SECRETARY _____
SECRETARY-ELECT _____
TREASURER _____
TREASURER-ELECT _____

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