

2021 CORPORATE APPLICATION

Please Check: ☐ New/ ☐ Renewal Current WEF ID Number _____

Name of Company/Firm _____

Headquarters Address, Street or P.O. Box Phone _____

City State/Province Zip/Postal Code Country _____

Letter of the alphabet you would like your company listed under: _____

NAME OF OFFICIAL REPRESENTATIVE

First Name	M.I.	Last Name	(Jr., Sr., etc.)
Title		Date of Birth (mm/yyyy)	
City	State/Province	Zip/Postal Code	Country
Address, Street or P.O. Box (if different from above)			
Home Phone	Cell Phone	Business Phone	
E-mail Address		Fax	
<input type="checkbox"/> I do NOT wish to receive information on special offers, discounts, training and educational events, and new product information to enhance my career.			

MEMBERSHIP INFORMATION

By joining WEF, you also become a member of a local Member Association (MA). Please enter your membership category (Box 1) and the Local MA you wish to join from the list on the next page. **Note:** District of Columbia, Illinois, Maryland, and Virginia residents have two MA choices. Please indicate your primary choice in box 2 below.

Dependent upon your membership level, \$55, \$47 or \$20 of your membership dues is allocated towards a subscription of Water Environment & Technology (WE&T) magazine that is non-deductible from the membership dues.

	DUES
1. Membership Category	
National Dues:	\$
2. Local MA Selection	
Local MA Name:	\$
3. Dual MA Selection (optional)	
Secondary MA Selections:	
TOTAL	\$

DEMOGRAPHIC INFORMATION

The following is requested for informational purposes only.

Gender: ☐ Female ☐ Male

Education:

- ☐ Doctorate ☐ AA/AAS
☐ MA/MBA/MS ☐ Technical School
☐ BA/BS ☐ High School

DID ANYONE RECOMMEND THAT YOU JOIN WEF?

Referring member's name: _____

Referring member's email address: _____


PAYMENT Forms received without payment will not be processed.


Federal Tax ID #: 53-0225129

<input type="checkbox"/> Personal Check <input type="checkbox"/> Company Check		Check No. _____	GRAND TOTAL	\$
Credit Card <input type="checkbox"/> American Express <input type="checkbox"/> Mastercard <input type="checkbox"/> VISA	Card Number _____	Exp Date _____	CVV _____	<input type="checkbox"/> Yes, please AUTO RENEW my membership! Your membership can be conveniently renewed on your membership anniversary when you sign up for automatic renewal. At the beginning of your membership year, you will automatically be charged for the next membership period to guarantee uninterrupted access to benefits, services, and subscriptions. Members can update their automatic renewal preferences at any time by contacting WEF Customer Service.
Signature _____ I authorize WEF to charge my credit card for the amount indicated.				
Name on Card _____				
Billing Address (if different than above) _____				
City/ State/Province _____				
Zip/Postal Code _____		Country _____		

Signature _____ **Date** _____
(Signature required for all applications)

 **Online:**
www.wef.org/joinwef

 **Mail Form and Payment:**
 WEF Membership
 P.O. Box 38008
 Baltimore, MD 21297-8008 USA

 **Phone:** 1.800.666.0206 or
 1.571.830.1545 globally
Fax: 1.240.396.2471

 **Email:** csc@wef.org

2021 WEF MEMBER ASSOCIATION DUES

UNITED STATES ASSOCIATIONS	CORPORATE
AK Alaska WWMA	30
AL Alabama's WEA	132
AR Arkansas WEA	110
AZ Arizona Water Association	65
CA California WEA	322
CO Rocky Mountain WEA	35
CT New England WEA	52
DC Chesapeake WEA	70
DC Federal Water Quality Association	100
DE Chesapeake WEA	70
FL Florida WEA	80
GA Georgia Association of Water Professionals	49
HI Hawaii WEA	60
IO Iowa WEA	20
ID Pacific Northwest CWA	70
IL Central States WEA	25
IL Illinois WEA	30
IN Indiana WEA	35
KA Kansas WEA	10
KY Clean Water Professionals of Kentucky & Tennessee	20
LA Louisiana WEA	100
MD Chesapeake WEA	70
MD Federal Water Quality Association	100
ME New England WEA	52
MI Michigan WEA	105
MN Central States WEA	25
MO Missouri WEA	35
MS Mississippi WEA	40
MT Montana WEA	95
NC North Carolina WEA	100
ND North Dakota WEA	20
NE Nebraska WEA	8
NH New England WEA	52
NJ New Jersey WEA	72
NM Rocky Mountain WEA	35
NV Nevada WEA	15
NY New York WEA	125
OH Ohio WEA	15
OK Oklahoma WEA	50
OR Pacific Northwest CWA	70
PA Pennsylvania WEA	55
PR Puerto Rico W&EA	50
RI New England WEA	52
SC WEA of South Carolina	45
SD South Dakota WEA	15
TN Clean Water Professionals of Kentucky & Tennessee	20
TX WEA of Texas	50
UT WEA of Utah	50
VA Virginia WEA	45
VA Federal Water Quality Association	100
VT New England WEA	52
WA Pacific Northwest CWA	70
WV West Virginia WEA	12
WI Central States WEA	25
WY Rocky Mountain WEA	35
Canadian Associations	
Atlantic Canada Water & Wastewater Association	33
British Columbia Water & WA	109
Quebec - Reseau Environnement*	30
WEA of Ontario	92
Western Canada WEA	65
Operator Associations (optional)	
International Associations: To join an association outside the U.S. and Canada, contact csc@wef.org or +1-571-830-1545	

MEMBERSHIP PROFILE

Please take a few moments to tell us about your background and professional interests.

1. What is the nature of your ORGANIZATION (ORG)? (select one only) – required

- | | |
|--|--|
| 01 Consulting, Contracting, Planning Services | 10 Utility: Drinking Water |
| 02 Educational Institution | 11 Utility: Stormwater |
| 03 Industrial Systems/Plants) | 12 Utility: Wastewater, Drinking Water, and Stormwater |
| 04 Manufacturer or Distributor of Equipment & Supplies (including representatives) | 13 Utility: Wastewater and Drinking Water |
| 05 Non-profits/NGOs | 14 Utility: Wastewater and Stormwater |
| 06 Finance, Investment, and Banking | 15 Other (Please define: fill in) |
| 07 Laboratories | _____ |
| 08 State or Federal Government | _____ |
| 09 Utility: Wastewater | _____ |

2. What is your Primary JOB FUNCTION? (select one only) (JOB)

- | | |
|----------------------------------|------------------------------------|
| 01 Executive Level | 12 Sales/Marketing |
| 02 Management Level | 13 Manufacturer's Representative |
| 03 Elected or Appointed Official | 14 Communications/Public Relations |
| 04 Educator | 15 IT/OT |
| 05 Student | 16 Other (Please define: fill in) |
| 06 Consultant/Contractor | _____ |
| 07 Engineering/Design | _____ |
| 08 Operator | _____ |
| 09 Scientist/Researcher | _____ |
| 10 Legislator/Regulator | _____ |
| 11 Analyst | _____ |

3. What areas do you consider to be your KEY FOCUS AREAS (FOC)? (select all that apply)

- | | |
|--------------------------------------|---|
| 01 Air Quality and Odor Control | 14 Public Communications and Outreach |
| 02 Biosolids and Residuals | 15 Regulation, Policy, Legislation |
| 03 Climate | 16 Research and Innovation |
| 04 Collection Systems | 17 Resource Recovery |
| 05 Disinfection and Public Health | 18 Safety, Security, Resilience |
| 06 Drinking Water | 19 Small Communities |
| 07 Energy | 20 Stormwater |
| 08 Finance and Investment | 21 Utility Management and Leadership |
| 09 Industrial | 22 Watershed Management |
| 10 Intelligent Water Technology | 23 Wastewater Treatment, Design, and Modeling |
| 11 Laboratory Analysis and Practices | 24 Water Reuse and Reclamation |
| 12 Nutrients | 25 Workforce |
| 13 Plant Operations and Maintenance | |

* The MA dues collected for Quebec-Reseau Environnement give access to limited benefits.