

PERSONAL INFORMATION

First Name	M.I.	Last Name	(Jr., Sr., etc.)
Business Name (if applicable)			
Street or P.O. Box <input type="checkbox"/> Business Address <input type="checkbox"/> Home Address			
City	State/Province	Zip/Postal Code	Country
Home Phone	Cell Phone	Business Phone	
E-mail Address		Date of Birth (mm/yyyy)	
<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. If you join both, please add your secondary selection as a Dual MA with the corresponding Dual MA dues in box 3 below.

Membership Categories			DUES	
<input type="checkbox"/> Professional	\$140	Individuals involved in or interested in water quality.	1. Membership Category	
<input type="checkbox"/> Global Professional	\$140	Individuals involved in or interested in water quality living outside of the U.S., U.S. territories and Canada.	National Dues:	\$
<input type="checkbox"/> Executive	\$310	Upper level managers interested in an expanded suite of WEF products/services.	2. Local MA Selection	
<input type="checkbox"/> Academic	\$140	Instructors/Professors interested in subjects related to water quality.	Local MA Name:	\$
<input type="checkbox"/> Professional Operator	\$75	Individuals involved in the day-to-day operation of wastewater collection, treatment or laboratory facility, or for facilities with a daily flow of < 1 mgd or 40 L/sec. License #: _____	3. Dual MA Selection (optional)	
<input type="checkbox"/> Young Professional (YP)	\$49	WEF members or former WEF Student members with 5 or less years of experience in the industry and less than 35 years of age. This package is available for 3 years.	Dual MA Name:	\$
<input type="checkbox"/> Student	\$20	Must be enrolled for a minimum of six credit hours in an accredited college or university. Must provide written documentation on school letterhead verifying status, signed by an advisor or faculty member.	TOTAL	
<input type="checkbox"/> E-Global	\$32	Individuals living outside of the U.S., U.S. Territories, and Canada. Includes benefits offered in electronic and online formats. Excludes conference discounts.		\$

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.

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

RACE/ETHNIC ORIGIN

The following is requested for informational purposes only.

African-American (Not of Hispanic Origin) Caucasian

American Indian or Alaskan Native Hispanic/Latino

Asian Pacific Islander or Native Hawaiian

Other _____

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		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.
<input type="checkbox"/> American Express					
<input type="checkbox"/> MasterCard					
<input type="checkbox"/> VISA	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)

2020 WEF MEMBER ASSOCIATION DUES

LOCATION		PROFESSIONAL	EXECUTIVE	ACADEMIC	OPERATOR	YP	STUDENT	DUAL MA
AK	Alaska WWMA	68	68	68	31	31	8	68
AL	Alabama's WEA	60	140	60	50	51	0	60
AR	Arkansas WEA	30	30	30	30	30	0	30
AZ	Arizona Water Association	65	65	65	65	65	15	65
CA	California WEA	192	192	192	192	96	0	192
CO	Rocky Mountain WEA	35	35	35	35	35	0	35
CT	New England WEA	45	45	45	35	21	5	45
DC	Chesapeake WEA	35	35	35	15	20	10	35
	Federal Water Quality Association	30	100	30	25	20	10	20
DE	Chesapeake WEA	35	35	35	15	20	10	35
FL	Florida WEA	63	63	63	53	52	4	60
GA	Georgia Association of Water Professionals	49	49	49	49	49	5	NA
HI	Hawaii WEA	15	15	15	15	0	0	10
IA	Iowa WEA	20	20	20	20	20	0	20
ID	Pacific Northwest CWA	70	70	70	45	30	15	70
	Central States WEA	30	30	30	30	15	0	30
IL	Illinois WEA	30	30	30	30	10	0	30
IN	Indiana WEA	35	35	35	35	35	0	35
KS	Kansas WEA	10	10	10	10	5	0	15
KY	Clean Water Professionals of Kentucky & Tennessee	20	20	20	20	10	0	20
LA	Louisiana WEA	20	20	20	10	10	5	20
	Chesapeake WEA	35	35	35	15	20	10	35
MD	Federal Water Quality Association	30	100	30	25	20	10	25
ME	New England WEA	45	45	45	35	21	5	45
MI	Michigan WEA	77	77	77	77	77	5	77
MN	Central States WEA	30	30	30	30	15	0	30
MO	Missouri WEA	37	35	37	35	25	11	35
MS	Mississippi WEA	25	25	25	25	25	20	15
MT	Montana WEA	10	11	10	10	5	5	5
NC	North Carolina WEA	80	80	80	30	30	20	80
ND	North Dakota WEA	15	20	15	15	15	0	15
NE	Nebraska WEA	8	8	8	8	8	8	8
NH	New England WEA	45	45	45	35	21	5	45
NJ	New Jersey WEA	42	42	42	42	15	15	42
NM	Rocky Mountain WEA	35	35	35	35	35	0	35
NV	Nevada WEA	20	20	20	15	15	10	20
NY	New York WEA	70	70	70	50	26	5	50
OH	Ohio WEA	30	27	30	20	15	5	30
OK	Oklahoma WEA	10	10	10	10	5	5	10
OR	Pacific Northwest CWA	70	70	70	45	30	15	70
PA	Pennsylvania WEA	55	55	55	55	55	15	55
PR	Puerto Rico W&EA	20	15	12	3	11	0	10
RI	New England WEA	45	45	45	35	21	5	45
SC	WEA of South Carolina	45	45	45	45	45	0	45
SD	South Dakota WEA	15	15	15	15	15	0	25
TN	Clean Water Professionals of Kentucky & Tennessee	20	20	20	20	10	0	20
TX	WEA of Texas	50	50	50	30	31	15	50
UT	WEA of Utah	10	50	10	10	10	10	10
	Virginia WEA	25	25	25	15	15	0	20
VA	Federal Water Quality Association	30	100	30	25	20	10	25
VT	New England WEA	45	45	45	35	21	5	45
WA	Pacific Northwest CWA	70	70	70	45	30	15	70
WV	West Virginia WEA	12	12	12	5	5	5	12
WI	Central States WEA	30	30	30	30	15	0	30
WY	Rocky Mountain WEA	35	35	35	35	35	0	35
Canadian Associations								
	Atlantic Canada Water & Wastewater Association	35	50	35	25	33	15	30
	British Columbia Water & Wastewater Association	99	99	99	99	99	25	99
	Quebec Section *	30	30	30	30	20	10	NA
	WEA of Ontario	92	92	92	92	48	15	92
	Western Canada WEA	65	65	65	40	25	15	65
Operator Associations (optional)								
IP	Illinois Assn of WPCO				20			20
KP	Kentucky Water and Wastewater Operators Association				40			30
TP	Texas Water Utility Assn				50			50
WIOA	Wisconsin Wastewater Works Operations Conference				50			50

International Associations: To join an association outside the U.S. and Canada, contact csc@wef.org or +1-571-830-1545.

* The MA dues collected for the Quebec Section give access to limited benefits.

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 Public/Private, Wastewater and/or Drinking Water and/or Stormwater | 09 Manufacturer of Water/Wastewater/Stormwater Equipment or Products |
| 02 Public/Private Wastewater only | 10 Water/Wastewater/Stormwater Product Distributor or Manufacturer's Rep. |
| 03 Public/Private Drinking Water only (e.g. municipality, utility, authority) | 11 Public/Private Stormwater (MS4) Program Only |
| 04 Industrial Systems/Plants | 12 Public Finance, Investment, and Banking |
| 05 Consulting or Contracting Firm | 13 Non-profits |
| 06 State, Federal, Regional Government Agency | 99 Other (please specify) |
| 07 Research or Analytical Laboratories | |
| 08 Educational Institution | |

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

- | | |
|---|---|
| 01 Management: Upper or Senior | 06 Purchasing/Marketing/Sales |
| 02 Management: Engineering, Laboratory, Operations, Inspection, Maintenance | 07 Educator |
| | 08 Student |
| 03 Engineering & Design Staff | 09 Elected or Appointed Public Official |
| 04 Scientific & Research Staff | 10 Other (please specify) |
| 05 Operations/Inspection & Maintenance | |

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

- | | |
|--|--|
| 01 Collection Systems | 10 Stormwater Management/ Floodplain Management/ Wet Weather |
| 02 Drinking Water | |
| 03 Industrial Water/Wastewater/ Process Water | 11 Toxic and Hazardous Material |
| 04 Groundwater | 12 Utility Management and Environmental |
| 05 Odor/Air Emissions | 13 Wastewater |
| 06 Land and Soil Systems | 14 Water Reuse and/or Recycle |
| 07 Legislation (Policy, Legislation, Regulation) | 15 Watershed/Surface Water Systems |
| 08 Public Education/Information | 16 Water/Wastewater Analysis and Health/Safety Water Systems |
| 09 Residuals/Sludge/ Biosolids/Solid Waste | 17 Other |