

Section 1: Member Information

COMPANY NAME _____

ADDRESS _____ PO BOX OR MAIL STOP _____

CITY _____ STATE/PROVINCE _____

ZIP/POSTAL CODE _____ COUNTRY _____

MAIN CONTACT NAME MR. MS. MRS. DR. _____

TITLE _____

PHONE _____ FAX _____

E-MAIL _____

Please be sure to provide your e-mail address, as it is required to receive member benefits that are delivered electronically.

▶ Were you referred by an AWWA member? Yes No Referring Member _____ Member # (if known) _____

How did you first learn about AWWA?

- Colleague E-mail AWWA publication or periodical Other, please specify: _____
 Direct Mail Conference/Seminar Internet

**What areas of the water and wastewater industry are of current interest to you?
(Please check all that apply)**

- | | | |
|---|--|--|
| <input type="radio"/> Asset Management (AM) | <input type="radio"/> Groundwater (GW) | <input type="radio"/> Resources Management/
Planning (WRMP) |
| <input type="radio"/> Backflow (BACK) | <input type="radio"/> Management/Leadership
(MANA) | <input type="radio"/> SCADA/GIS (SG) |
| <input type="radio"/> Conservation (CE) | <input type="radio"/> Membrane Treatment (MT) | <input type="radio"/> Security (SECU) |
| <input type="radio"/> Customer Service (CS) | <input type="radio"/> Operations (OPER) | <input type="radio"/> Water Reuse (WR) |
| <input type="radio"/> Desalination (DESA) | <input type="radio"/> Public Information/
Relations (PIR) | <input type="radio"/> Water Treatment (TREA) |
| <input type="radio"/> Design (DESI) | <input type="radio"/> Regulatory/Legislative (RL) | <input type="radio"/> Water Quality (WQT) |
| <input type="radio"/> Distribution (DS) | | <input type="radio"/> Young Professional (YP) |

Completion of this information is optional

AWWA maintains profile data for use in developing programs and services to meet the diverse needs of our members.

Race/Ethnic Identification

1. American Indian/Alaskan Native
2. Asian/Pacific Islander
3. African-American
4. Hispanic
5. White (non-Hispanic)
6. Other

Gender

- Female
 Male

Birth Year _____

Section 2: Circulation Information

All applicants must complete this section.

**What one business activity best describes your company?
(Please check only one)**

- A Public Water Supply Utility—Municipally Owned
 B Public Water Supply Utility—Investor Owned
 C Government—Federal, State, Local
 D Consulting Firm
 E Contractor
 F Private Industrial System or Water Wholesaler
 G Manufacturer of Equipment & Supplies (including representatives)
 H Distributor of Equipment & Supplies (including representatives)
 I Educational Institutions (faculty and students),
Libraries and other related organizations
 J Fully Retired
 K Research Lab
 L Other allied to the field (please specify) _____

What one category best describes your job title? (Please check only one)

- A Executive (General Manager, Commissioner, Board Member, City Manager,
Municipal Supt., Mayor, President, Vice President, Owner, Partner, Director, etc.)
 B Management/Non-Engineering (Division Head, Section Head, Manager, Dept.
Head, Comptroller, etc.)
 C Design and Engineering/Both Managerial and Non-Managerial (Chief Engineer,
Civil Engineer, Mechanical Engineer, Elect. Engineer, Environmental Engineer,
Planning Manager, Field Engineer, System Designer, etc.)
 D Scientific/Non-managerial (Chemist, Biologist, Biophysicist,
Researcher, Analyst, etc.)
 E Purchasing (Purchasing Agent, Procurement Specialist, Buyer, etc.)
 F Operations (Foreman, Operator, Maintenance Crewman, Service Representative, etc.)
 G Marketing & Sales/Non-Managerial (Market Analyst, Marketing Representative,
Salesperson, Sales Representative, etc.)
 I Professorial (Educator, Teacher, etc.)
 Z Other (please specify) _____

What one category best describes your field served/principal activity? (Please check only one)

- 9 Both Water Supply & Wastewater 5 Water Supply Only 7 Wastewater Only 3 Other *Over, please*

Section 3: Dues and Benefits

Please select the appropriate membership category based on your utility's size from the chart below. If your utility is both water and wastewater, use the number of connections that is greater. Customer Service Connections = Wholesale & retail populations ÷ 3.5.

Please provide your number of customer service connections or collection system **connections** _____ and **population served** _____.

Customer Service Connections	1st Year Dues 25% Discount (ORG2011)	Annual Dues Current Members	Plus+Points To be used on Standards Subscriptions and/or Additional Individuals, each year your membership is active
0-5,000 (80)	\$221	\$295	0
5,001-10,000 (81)	\$1,211	\$1,615	50
10,001-25,000 (82)	\$2,284	\$3,045	250
25,001-50,000 (83)	\$3,638	\$4,850	425
50,001-100,000 (84)	\$5,869	\$7,825	650
100,001-150,000 (85)	\$8,149	\$10,865	825
150,001 and greater (86)	\$13,144	\$17,525	1,225

Plus+ Points

Use the chart above to identify how many Plus+Points are available to your organization and customize your benefits below. Unused Plus+Points will be forfeited.

Selection	Product No.	Retail Value	Quantity	Plus+Points Needed	Plus+Points Spent
AWWA Standards AWWA Standards are recognized as the consensus standards for products and procedures used in the treatment and supply of safe water. Only one copy will be provided in print. This selection includes standards updates for the year. Printed Searchable CD-ROM	49000	\$3,445	<input type="radio"/> 0 or <input type="radio"/> 1 x	75	= _____
	40000	\$3,445	_____ x	75	= _____
Individual Memberships You can select and assign individual membership to specific company employees. While all employees will enjoy member pricing, assigned members receive the full benefits of membership including <i>Journal AWWA</i> , section membership, and credit toward becoming a Life Member.			_____ x	50	= _____
	Total Plus+Points Spent _____				

If you have selected Individual Memberships as a benefit, please designate the individuals below. Be sure to include a mailing address if different from the address used on this application. Attach additional sheets as necessary. See Section 4B for pricing.

Name	Title	Address (if different)	E-mail
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Section 4: Assessments

4A—Primary Section Assessment

AWWA has 43 sections in North America. Your membership automatically enrolls you in a section based on your address. Some sections require additional fees to better service their local members.

A section assessment is required if your organization is located in one of the following areas:

4B—Additional Individual Members

If you have chosen Additional Individual Members with your **Plus+Points**, you may be subject to additional section assessments depending on your location. Please refer to the chart on the right to determine the appropriate section assessment fee, if any, which will apply to each Additional Individual Member you designate. (regardless of their address)

4C—Additional Section Options

In addition to your organization's primary section membership, you may also join other AWWA sections. This allows you to receive information on events and activities from other sections of your choice. If you are interested in joining additional sections, please call 1.800.926.7337 for information and assessment fees, then indicate your choices here: _____

Your State/Province

	Utility Grade			
	(80)	(81)	(82)	(83-86)
Alaska, Connecticut, Minnesota, Missouri, Ontario.....	\$15	\$81	\$152	\$165
Alberta, Arizona, Illinois, Kentucky, Manitoba, New York, Northwest Territories, Saskatchewan, Tennessee, Texas, Wisconsin.....	\$30	\$162	\$165	\$165
Alabama, Arkansas, Idaho, Louisiana, Mississippi, New Jersey, Oklahoma, Oregon, Pennsylvania, Utah, Washington.....	\$44	\$165	\$165	\$165
Florida, Georgia, Indiana, Iowa, South Carolina.....	\$59	\$165	\$165	\$165
California, Maine, Massachusetts, Nevada, New Hampshire, Rhode Island, Vermont.....	\$118	\$165	\$165	\$165
Alaska, Connecticut, Minnesota, Missouri, Ontario.....				\$8
Alberta, Arizona, Illinois, Kentucky, Manitoba, New York, Northwest Territories, Saskatchewan, Tennessee, Texas, Wisconsin.....				\$17
Alabama, Arkansas, Idaho, Louisiana, Mississippi, New Jersey, Oklahoma, Oregon, Pennsylvania, Utah, Washington.....				\$25
Florida, Georgia, Indiana, Iowa, South Carolina.....				\$33
California, Maine, Massachusetts, Nevada, New Hampshire, Rhode Island, Vermont.....				\$66

Section 5: Additional Subscriptions

Membership includes one print subscription to *Journal AWWA* and *Opflow*. Additional print copies of these publications may be purchased.

Note: Your Additional Individual Members also receive a print subscription to *Journal AWWA* and *Opflow* as part of their membership.

Journal AWWA—Both a professional and a scholarly publication, *Journal AWWA* offers technically accurate, peer-reviewed articles and information about all aspects of the water profession.

Opflow—As the water industry's most popular resource on water operations issues, *Opflow* offers practical, hands-on solutions to everyday problems.

Publication	Number of Annual Subscriptions	Price	Total
<i>Journal AWWA</i>	_____	x \$53 =	\$ _____
<i>Opflow</i>	_____	x \$34 =	\$ _____
			\$ _____

Section 6: Payment

1st Year Dues	\$ _____	(As indicated in Section 3)
Primary Section Assessment (if applicable)	\$ _____	(Enter amount from Section 4A)
Additional Individual Members Assessment (if applicable)	\$ _____	(Enter amount from Section 4B)
Additional Section Option (if applicable)	\$ _____	(Enter amount from Section 4C)
Additional Subscriptions (optional)	\$ _____	(Enter amount from Section 5)
Total	\$ _____	

Payment Method

- Check enclosed (Make payable to AWWA. US currency only, drawn on a US bank)
 Send invoice
 American Express
 Discover
 MasterCard
 VISA

No action will be taken on this application until payment is received.

Card Holder _____
 Card Number _____
 Expiration Date _____

Section 7: Application Instructions

Mail completed application to: **Fax completed application to:**

AWWA Customer Service
 6666 West Quincy Avenue
 Denver, CO 80235-3098 USA

303.347.0804

**Questions? Call Customer Service
 at 1.800.926.7337 or 303.794.7711.**

Dues and section assessment rates valid through Dec. 31, 2011. Dues are not deductible as charitable contributions for income tax purposes. The following is for USPS periodical mailing requirements only. In some AWWA sections, a portion of the section allotment equal to 50% or more of the domestic subscription rate charged for the section periodical will be allocated toward a subscription to that periodical. Allocation for each publication recipient authorized - *Journal AWWA* = \$50; *Opflow* = \$16. Allocation for eligible organization members - *Drinking Water Research Quarterly* = \$3. NOTE: Member's phone numbers, fax numbers, and email addresses are protected under AWWA's Privacy Policy.