

2023 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/dd/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	\$

DONATE: SUPPORT WEF'S MISSION AND PROGRAMS

To learn more about each program, please visit: <https://www.wef.org/about/donate-to-wef-programs/> All donations are tax-deductible.

<input type="checkbox"/> Water Environment Federation (WEF): Support our mission and programs.	\$
<input type="checkbox"/> Stockholm Junior Water Prize: Support the annual water related science research project competition for high school students.	\$
<input type="checkbox"/> InFLOW Scholarship Program: Support the program to increase diversity and inclusion within the water workforce.	\$
<input type="checkbox"/> 2023 WEF Community Service Project at WEFTEC in Chicago at the Ole A. Thorp Scholastic Academy.	\$
DONATION TOTAL	\$

DEMOGRAPHIC INFORMATION

The following is requested for informational purposes only.

Gender: Female Male Other

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: _____

HOW DID YOU FIRST HEAR ABOUT WEF?

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.
Credit Card		
<input type="checkbox"/> American Express	Card Number	Exp Date
<input type="checkbox"/> Mastercard		CVV
<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	

GRAND TOTAL \$

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 _____

Date _____

(Signature required for all applications. Representative acknowledges the WEF Code of Conduct (www.wef.org/wef-member-code-of-conduct) is applicable for all members.)



Online: Signature required for all applications. Representative acknowledges the WEF Code of Conduct (www.wef.org/wef-member-code-of-conduct) is applicable for all members.)



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

2023 WEF MEMBER ASSOCIATION DUES

UNITED STATES ASSOCIATIONS		CORPORATE
AK	Alaska WWMA	30
AL	Alabama's WEA	132
AR	Arkansas WEA	N/A
AZ	Arizona Water Association	65
CA	California WEA	338
CO	Rocky Mountain WEA (CO, NM, WY)	35
CT	New England WEA (CT, MA, ME, NH, RI, VT)	78
DC	Chesapeake WEA (DC, DE, MD)	80
	Federal Water Quality Association (DC, MD, VA)	100
DE	Chesapeake WEA (DC, DE, MD)	80
FL	Florida WEA	80
GA	Georgia Association of Water Professionals	49
HI	Hawaii WEA	60
IA	Iowa WEA	20
ID	Pacific Northwest CWA (ID, OR, WA)	70
IL	Central States WEA (IL, MN, WI)	35
	Illinois WEA	35
IN	Indiana WEA	35
KS	Kansas WEA	10
KY	Clean Water Professionals of Kentucky & Tennessee	45
LA	Clean Water Professionals of Louisiana	100
MA	New England WEA (CT, MA, ME, NH, RI, VT)	78
MD	Chesapeake WEA (DC, DE, MD)	80
	Federal Water Quality Association (DC, MD, VA)	100
ME	New England WEA (CT, MA, ME, NH, RI, VT)	78
MI	Michigan WEA	95
MN	Central States WEA (IL, MN, WI)	35
MO	Missouri WEA	35
MS	Mississippi WEA	40
MT	Montana WEA	11
NC	NC One Water	105
ND	North Dakota WEA	20
NE	Nebraska WEA	10
NH	New England WEA (CT, MA, ME, NH, RI, VT)	78
NJ	New Jersey WEA	72
NM	Rocky Mountain WEA (CO, NM, WY)	35
NV	Nevada WEA	30
NY	New York WEA	125
OH	Ohio WEA	50
OK	Oklahoma WEA	50
OR	Pacific Northwest CWA (ID, OR, WA)	70
PA	Pennsylvania WEA	60
PR	Puerto Rico W&EA	50
RI	New England WEA (CT, MA, ME, NH, RI, VT)	78
SC	WEA of South Carolina	45
SD	South Dakota WEA	15
TN	Clean Water Professionals of Kentucky & Tennessee	45
TX	WEA of Texas	70
UT	WEA of Utah	50
VA	Virginia WEA	55
	Federal Water Quality Association (DC, MD, VA)	100
VT	New England WEA (CT, MA, ME, NH, RI, VT)	78
WA	Pacific Northwest CWA (ID, OR, WA)	70
WV	West Virginia WEA	12
WI	Central States WEA (IL, MN, WI)	35
WY	Rocky Mountain WEA (CO, NM, WY)	35
Canadian Associations		
	Atlantic Canada Water & Wastewater Association	33
	British Columbia Water & WA	109
	Reseau Environment	50
	WEA of Ontario	92
	Western Canada WEA	65

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

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

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

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

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

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