

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 more than one MA, please add your secondary selection(s), with the corresponding dues amounts in box 3 below.

Membership Categories			DUES
<input type="checkbox"/> Professional	\$140	Individuals involved in or interested in water quality.	1. Membership Category National Dues: \$
<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.	
<input type="checkbox"/> Executive	\$310	Upper level managers interested in an expanded suite of WEF products/services.	
<input type="checkbox"/> Academic	\$140	Instructors/Professors interested in subjects related to water quality.	2. Local MA Selection 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 #: _____	
<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.	3. Secondary MA Selection(s) (optional) \$
<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.	
<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.	
			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

RACE/ETHNIC ORIGIN

The following is requested for informational purposes only.

- African-American (Not of Hispanic Origin)
 American Indian or Alaskan Native
 Asian
 Caucasian
 Hispanic/Latino Origin
 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	\$
<input type="checkbox"/> Credit Card	Card Number	Exp Date	<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	Signature I authorize WEF to charge my credit card for the amount indicated.			
<input type="checkbox"/> Mastercard	Name on Card			
<input type="checkbox"/> VISA	Billing Address (if different than above)			
City/ State/Province				
Zip/Postal Code		Country		

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:
www.wef.org/joinwef
 (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

2022 WEF MEMBER ASSOCIATION DUES

LOCATION	PROFESSIONAL	EXECUTIVE	ACADEMIC	OPERATOR	YP	STUDENT
AK	Alaska WWMA	68	68	68	31	8
AL	Alabama's WEA	60	140	60	50	0
AR	Arkansas WEA	30	30	30	30	0
AZ	Arizona Water Association	65	65	65	65	15
CA	California WEA	192	192	192	192	0
CO	Rocky Mountain WEA	35	35	35	35	0
CT	New England WEA	45	45	45	35	5
DC	Chesapeake WEA	40	50	40	15	10
DE	Federal Water Quality Association	30	100	40	25	10
DE	Chesapeake WEA	40	50	40	15	10
FL	Florida WEA	63	63	63	53	4
GA	Georgia Association of Water Professionals	49	49	49	49	5
HI	Hawaii WEA	15	15	15	15	0
IO	Iowa WEA	20	20	20	20	0
ID	Pacific Northwest CWA	70	70	70	45	15
IL	Central States WEA	30	30	30	30	0
IL	Illinois WEA	30	30	30	30	0
IN	Indiana WEA	35	35	35	35	35
KA	Kansas WEA	10	10	10	10	0
KY	Clean Water Professionals of Kentucky & Tennessee	20	20	20	20	0
LA	Louisiana WEA	20	20	20	10	5
ME	New England WEA	50	50	50	35	5
ME	Chesapeake WEA	40	50	40	15	10
MD	Federal Water Quality Association	30	100	40	25	10
NH	New England WEA	50	50	50	35	5
MI	Michigan WEA	80	80	80	80	20
MN	Central States WEA	30	30	30	30	0
MO	Missouri WEA	37	35	37	35	11
MS	Mississippi WEA	25	25	25	25	0
MT	Montana WEA	10	11	10	10	5
NC	North Carolina WEA	85	85	85	35	20
ND	North Dakota WEA	15	20	15	15	0
NE	Nebraska WEA	10	10	10	10	10
NH	New England WEA	50	50	50	35	5
NJ	New Jersey WEA	42	42	42	42	15
NM	Rocky Mountain WEA	35	35	35	35	0
NV	Nevada WEA	30	30	30	30	30
NY	New York WEA	70	70	70	50	5
OH	Ohio WEA	30	27	30	20	5
OK	Oklahoma WEA	10	10	10	10	5
OR	Pacific Northwest CWA	70	70	70	45	15
PA	Pennsylvania WEA	55	55	55	55	15
PR	Puerto Rico W&EA	20	15	12	3	0
RI	New England WEA	50	50	50	35	5
SC	WEA of South Carolina	45	45	45	45	0
SD	South Dakota WEA	15	15	15	15	0
TN	Clean Water Professionals of Kentucky & Tennessee	20	20	20	20	0
TX	WEA of Texas	70	70	50	50	15
UT	WEA of Utah	10	50	10	10	10
VA	Virginia WEA	25	25	25	15	0
VA	Federal Water Quality Association	30	100	40	25	10
VT	New England WEA	50	50	50	35	5
WA	Pacific Northwest CWA	70	70	70	45	15
WV	West Virginia WEA	12	12	12	5	5
WI	Central States WEA	30	30	30	30	0
WY	Rocky Mountain WEA	35	35	35	35	0
Canadian Associations (includes MA dues)						
	Atlantic Canada Water & Wastewater Association	35	50	35	25	15
	British Columbia Water & Wastewater Association	109	109	109	109	25
	Quebec Section-Reseau Environment*	30	30	30	N/A	10
	WEA of Ontario	92	92	92	92	15
	Western Canada WEA	65	65	65	40	15
Operator Associations (optional)						
IP	Illinois Assn of WPCO				20	
KP	Kentucky Water and Wastewater Operators Association				40	
TP	Texas Water Utility Assn				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 Quebec-Reseau Environment 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 Consulting, Contracting, Planning Services
- 02 Educational Institution
- 03 Industrial Systems/Plants)
- 04 Manufacturer or Distributor of Equipment & Supplies (including representatives)
- 05 Non-profits/NGOs
- 06 Finance, Investment, and Banking
- 07 Laboratories
- 08 State or Federal Government
- 09 Utility: Wastewater
- 10 Utility: Drinking Water
- 11 Utility: Stormwater
- 12 Utility: Wastewater, Drinking Water, and Stormwater
- 13 Utility: Wastewater and Drinking Water
- 14 Utility: Wastewater and Stormwater
- 15 Other (Please define: fill in)

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

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

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

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