



# Employee Assistance Professionals Association

## Application

New Member       Renewal Member      Renewal ID # \_\_\_\_\_  
 First Name \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Degrees/Licenses/Certifications (*list 3 most important*) \_\_\_\_\_  
 Company Name \_\_\_\_\_ Job Title \_\_\_\_\_  
 Mailing Address:       Home       Office  
 Address \_\_\_\_\_ Suite or Apt # \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Province \_\_\_\_\_ Country \_\_\_\_\_  
 Work Phone \_\_\_\_\_ Fax \_\_\_\_\_ Home \_\_\_\_\_  
 Email Address \_\_\_\_\_

**Affirmation of EAPA Code of Ethics:**

I pledge while a member of EAPA to observe the attached EAPA Code of Ethics.

Signature \_\_\_\_\_  
Date \_\_\_\_\_

**Do not** include my information in address list sales

**Important Notice** – Annual dues for Professional and Associate Members from outside the United States are divided into two tiers, based upon the World Bank’s formal categorization of national economies. Non-U.S. members can find their appropriate category reflected on the Categorization of National Economies located at: <http://www.eapassn.org/files/public/membership/FY2010Tier1Nations.pdf>

World Bank Category	EAPA Tier
*Upper income Economies	1
**All other income categories	2

## Membership Fees

Please note that your membership will not be activated until payment is received in full.

Professional (U.S.)	(PROF)	\$160.00	\$ _____	
Professional* (Non – U.S. Tier 1)	(PROF1)*	\$140.00	\$ _____	
Professional** (Non – U.S. Tier 2)	(PROF2)**	\$100.00	\$ _____	
Certified Professional (U.S.)	(PROFC)	\$160.00	\$ _____	CEAP Expiration _____
Certified Professional* (Non – U.S. Tier 1)	(PROFC1)*	\$140.00	\$ _____	CEAP Expiration _____
Certified Professional** (Non – U.S. Tier 2)	(PROFC2)**	\$100.00	\$ _____	CEAP Expiration _____
Retired Professional (U.S.)	(PROFR)	\$160.00	\$ _____	
Retired Professional* (Non – U.S. Tier 1)	(PROFR1)*	\$140.00	\$ _____	
Retired Professional** (Non – U.S. Tier 2)	(PROFR2)**	\$100.00	\$ _____	
Associate (U.S.)	(ASSOC)	\$160.00	\$ _____	
Associate* (Non – U.S. Tier 1)	(ASSOC1)*	\$140.00	\$ _____	
Associate** (Non – U.S. Tier 2)	(ASSOC2)**	\$100.00	\$ _____	
Student	(STUDENT)	\$ 65.00	\$ _____	
Government Agency	(AGENCY)	\$160.00	\$ _____	
Organizational	(ORGM)	\$360.00	\$ _____	

## Chapters and Fees (does not apply to Organizational Membership)

Chapter #1 (Required for U.S. members)	ID _____	\$ _____
Chapter #2	ID _____	\$ _____
Chapter #3	ID _____	\$ _____
Chapter #4	ID _____	\$ _____
Chapter #5	ID _____	\$ _____

**Chapters, Branches and Unaffiliated Members:**

A Chapter Development Assessment will be charged to all U.S. members not affiliated with an existing U.S. EAPA chapter. If you are a member of one or more of chapters, you will not be charged this assessment.

No Chapter (US only)	ZZ01 Assessment	\$35.00	\$ _____
<b>EAPA Membership and Chapter Total</b>			<b>\$ _____</b>

## Payment Information

Check/Money Order # \_\_\_\_\_

American Express     Visa     Master Card     Discover

Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_

Name on Card \_\_\_\_\_

E-mail: [mbrdatadm@eapassn.org](mailto:mbrdatadm@eapassn.org)  
 Phone: 703-387-1000 ext 334  
 Fax: 703-522-4585

**Mail Application Form and Payment to:**  
**EAPA**  
 4350 N Fairfax Drive, Suite 410  
 Arlington, VA 22203

**Membership Dues are Non-Refundable**

**Form Date: 6/11/2010**