



AIANNH Caucus Membership Form

Please complete this form and include check or money payable to "AIANNH Caucus" and mail to:

Patricia Cochran, AIANNH Treasurer
PO Box 242792,
Anchorage, AK 99524

Membership Type

Non-Student - \$25 Student - \$5 Dues Waived - \$0 Corporate - \$100 Other - \$

Are you a current member of APHA?

Yes No

Membership Number: _____

Section(s): _____

Personal Information

Name: _____

Tribal Affiliation (if any): _____

College Degree(s): _____

Phone Number: _____

Current Occupation Category/type (Check all that apply)

Government State/City Agency Non-Government Industry Other
Researcher PH Planning Policy Design/Implementation Student (see below)

Your Organization/Title: _____

For Students

College/University: Exp. Grad Date: _____

Degree Sought: _____

Contact Information

E-mail Address: _____

Current City and State: _____

Would you be interested in more information about volunteering with any committees?

Policy/Resolutions Membership Nominations Panel Moderator Student
Operations Media Development Abstract Reviewer Program Planning

Any Additional Info that you would like to share

Please note that AIANNH Caucus membership runs from the APHA Annual Meeting.

Membership co-chairs' contact information:

Katie Cueva
kcueva@alaska.edu

Marc Emerson
mae989@gmail.com