



**California Conference  
of Directors of  
Environmental Health**

**Associate and  
Organization/Consultant**

**MEMBERSHIP APPLICATION**

<i>NAME:</i>	<i>DATE:</i>	
<i>TITLE &amp; ORGANIZATION:</i>		
<i>ADDRESS:</i>		
<i>CITY:</i>	<i>STATE:</i>	<i>ZIP:</i>
<i>EMAIL:</i>	<i>PHONE:</i>	
<i>Applicant Signature:</i>		
<p>■ <i>Name of Nominating CCDEH Director:</i> _____  <i>Attach a resume and short biography so we can get to know you.</i></p> <p>■ <i>Please include payment of fee:</i>  <b>ASSOCIATE MEMBERSHIP FEE: \$427.00 per year</b>  <b>CONSULTANT/ORGANIZATION FEE: \$427.00 per year (non-profit)</b>  <b>CONSULTANT/ORGANIZATION FEE: \$811.00 per year (for profit)</b></p>		

● *An Associate Membership category is limited to program managers and supervisors of a local California environmental health service delivery organization.*

● *A Consultant/Organization category is limited to a representative of a business that serves CCDEH or its members or a local, state, tribal or federal agency or organization in the field of environmental health.*

*Please circle your Primary Committee area of interest: Food Safety; Hazardous Materials/Waste; Emergency Preparedness; Solid Waste; Community E. H.; IT - Data Management; Water & Land Use*

**Return to CCDEH for Approval:**  
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