Reset Form

Print Form

MEMBERSHIP APPLICATION
Association for Practical and Professional Ethics

Indiana University, 618 East Third Street, Bloomington, Indiana 47405
TEL: (812) 855-6450; FAX: (812) 856-4969
E-mail: appe@indiana.edu; http://www.indiana.edu/~appe/

The membership year runs from July 1 to June 30
Individual membership dues are based on personal income level

☐ **New Membership** ☐ **Renewal** ☐ **Individual** ☐ **Institutional**

Name of individual or institutional applicant (please circle preferred title, e.g., Professor, Dr., Ms., Mr., Mrs.): _____

Institutional Designated Member* (Institution Director): _____

Sustaining Institutional Members‡ (up to four additional names): _____

_____ _____ _____

College, University, Business, or Professional Affiliation, if applicable: Retired ☐ Student ☐

_____

Address: _____

_____

_____

Telephone number: _____ **Fax number**: _____

E mail address: _____

Organizational URL/Web site address: _____

Description for directory: Please provide a few key words to indicate your practice, research, or teaching interests (e.g., medicine, teaching, law, business, research ethics, engineering, etc.). Please limit your description to 250 characters. This information will appear in the Association's Member Directory.

_____

_____

☐ The Association rents its mailing list for one-time use to organizations whose purposes are consistent with the aims of the Association. Please check here if you do not want your name included.

MEMBERSHIP DUES CALCULATION

INDIVIDUAL MEMBERSHIPS ♦

☐ <$25K ..... $40 USD
☐ $25K-40K ..... $65 USD
☐ $41K-75K ..... $90 USD
☐ $76K-100K ..... $115 USD
☐ >$100K ..... $140 USD
☐ Supporting Individual Member ..... $165 USD
☐ Sustaining Individual Member ..... $265 USD

INSTITUTIONAL MEMBERSHIPS

☐ Institutional Member* ..... $200 USD
☐ Sustaining Institutional Member‡ .... $550 USD
☐ RCREC Organizational Member† ... $500 USD
☐ RCREC Organizational Sponsor† $2,000 USD or more

☐ Check here to be part of the RCREC interest group
(RCREC, Responsible Conduct of Research Education Committee)

♦ Retired individuals should select an appropriate income level

* Applicants for institutional membership should include a brief description of the mission of the institution and provide appropriate descriptive information (brochures, newsletters, etc.). Institutional memberships are subject to the approval of the Executive Committee. Institutional membership includes one individual membership, listing in *Profiles in Ethics*, a discounted rate for one member at the Annual Meeting, and postings on the Association website at no additional cost.

‡ Sustaining institutional membership provides five individual memberships, as designated by the institution's director, and discounted rates for all members at the Annual Meeting.

† Includes an Institutional membership and the rights to use the RCR Internet-based course in your organization

Please Do Not Write In This Space - For Official Use Only.

MEMBERSHIP DUES PAYMENT

E-mail Form

Please make check payable to: IU - Association for Practical and Professional Ethics, and mail to:
Association for Practical and Professional Ethics, Indiana University, 618 East Third Street, Bloomington, IN 47405

Credit card payments may be faxed to 812-856-4969. All fees are in U.S. dollars

TOTAL ENCLOSED

For members outside the U.S., we can accept credit card payments only *<u>DO NOT</u> EMAIL CREDIT CARD NUMBER!*****

Only VISA and MasterCard are accepted. Card Type (circle one): VISA MasterCard AmEx

$

Cardholder's Printed Name and Signature _____

Account Number _____ Expiration Date _____

Revised September 2009