



# icphso

## ICPHSO Membership Application

International Consumer Product Health & Safety Organization

7044 S. 13th Street - Oak Creek, WI. 53154

P: (414) 908-4930 F: (414) 768-8001

EIN: 52-2048606

**This is a two part application for a one year membership.**

**Part 1: Please check the membership category you desire on Page 1.**

**Part 2: Complete the application on Page 2.**

Membership Categories	Dues
<input type="checkbox"/> <b>*Business Membership - Manufacturers, Consultants, Testing Labs, Law Firms, Retailers</b> <ul style="list-style-type: none"> <li>◆ Each representative will receive ICPHSO membership credentials and access to the "Members Only" section of the ICPHSO website; which includes handouts from any of the conferences, member directory and other valuable information.</li> <li>◆ Quarterly newsletter and E-news updates.</li> <li>◆ A \$50 discount on (1) exhibit booth at the Annual Conference.</li> <li>◆ Preferred exhibit booth assignment at the Annual Conference. (First Come First Serve)</li> <li>◆ A <b>\$150.00 discount</b> off your choice of any <u>one</u> registration fee to an ICPHSO symposium, conference or regional workshop.</li> <li>◆ You can attend any ICPHSO event at the Members Only rate, where applicable.</li> <li>◆ Receive a <b>20% discount</b> when purchasing additional ICPHSO branded products.</li> </ul>	<b>\$300</b>
<input type="checkbox"/> <b>*Additional Business Membership - Manufacturers, Consultants, Testing Labs, Law Firms, Retailers (To qualify for an Additional Business Membership, a primary Business Membership is required.)</b> <ul style="list-style-type: none"> <li>◆ Each representative will receive ICPHSO membership credentials and access to the "Members Only" section of the ICPHSO website which includes handouts from any of the conferences, member directory and other valuable information.</li> <li>◆ Quarterly newsletter and E-news updates.</li> <li>◆ A <b>\$50.00 discount</b> off your choice of any <u>one</u> registration fee to an ICPHSO symposium, conference or regional workshop.</li> <li>◆ You can attend any ICPHSO event at the Members Only rate, where applicable.</li> <li>◆ Receive a <b>20% discount</b> when purchasing additional ICPHSO branded products.</li> </ul>	<b>\$150</b>
<input type="checkbox"/> <b>Non-Business Membership - Government (National, Regional, or Local Level), Student, Retiree or Academic, Consumer, Health Care, Media</b> <ul style="list-style-type: none"> <li>◆ Each representative will receive ICPHSO membership credentials and access to the "Members Only" section of the ICPHSO website which includes handouts from any of the conferences, member directory and other valuable information.</li> <li>◆ Quarterly newsletter and E-news updates.</li> <li>◆ A <b>\$50.00 discount</b> off your choice of any <u>one</u> registration fee to an ICPHSO symposium, conference or regional workshop.</li> <li>◆ You can attend any ICPHSO event at the Members Only rate, where applicable.</li> <li>◆ Receive a <b>20% discount</b> when purchasing additional ICPHSO branded products.</li> </ul>	<b>\$100</b>
<input type="checkbox"/> <b>Non-Conference Membership (This membership is for individuals who will not be attending any ICPHSO symposiums, conferences or regional workshops.)</b> <ul style="list-style-type: none"> <li>◆ Each representative will receive ICPHSO membership credentials and access to the "Members Only" section of the ICPHSO website which includes handouts from any of the conferences, member directory and other valuable information.</li> <li>◆ Quarterly newsletter and E-news updates.</li> <li>◆ Receive a <b>20% discount</b> when purchasing additional ICPHSO branded products.</li> <li>◆ Should you choose to attend any of the ICPHSO symposiums, conferences or regional workshops, you will <u>not</u> be eligible to receive a registration discount or the Members Only rate.</li> </ul>	<b>\$75</b>

**\* Membership is owned by the company and can only be transferred to another person within the company.**

Name: \_\_\_\_\_  
 (First Name) (Middle Initial) (Last Name)

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_

Alternate Phone Number: \_\_\_\_\_

Primary E-mail Address: \_\_\_\_\_

Alternate E-mail Address: \_\_\_\_\_

Website (If any): \_\_\_\_\_

Fax Number: \_\_\_\_\_

Please answer the following question (check one):

Would you like to be listed in the ICPHSO Membership Directory?

YES  NO

**PAYMENT INFORMATION**

**\*\*If mailing in your payment, please send this form along with your payment, made payable in US Dollars from a US Bank to ICPHSO.\*\***

Check  Visa  MasterCard  American Express

Card Holders Name: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ \*\*\* Security Code: (See below)

Signature of Card Holder: \_\_\_\_\_

\*\*\* The Security Code or CVV number is a security feature on all credit cards. Merchants require this code to conform to the credit card security standards. For Mastercard and Visa the CVV code is the last 3 digits listed on the back of your card by your signature. For American Express the CVV code is the 4 digit number listed on the front of your card.

Visa/Mastercard



American Express



**NOTE: If you have any difficulties, please contact Customer Care at 414-908-4930 Ext. 450 or email to CustomerCare@ICPHSO.org.**