



## Affiliate Membership Form

### Corporate Affiliate Membership Contribution Level

- \$1,500 (1-50 employees)       \$2,500 (51-150 employees)       \$3,500 (151-300 employees)       \$5,000 (300+ employees)
- A Visual Reference for Evidence-Based Design*, \$199 (free with membership)

**Shipping:**  \$15 US  \$40 Int'l

### Professional Affiliate Membership Contribution Level

- \$500       \$750       \$1,000
- A Visual Reference for Evidence-Based Design*, \$199 (free with membership)

**Shipping:**  \$15 US  \$40 Int'l

### Payment Information

\_\_\_\_ Bill my credit card (circle one):      MC      Visa      Amex      \_\_\_\_ Check is enclosed

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

3-digit Security Code (on signature bar on back of card): \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Signature: \_\_\_\_\_

Name of Member: \_\_\_\_\_

Title: \_\_\_\_\_

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

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

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Fax this form to 925-521-9405 or, e-mail to [jbouchard@healthdesign.org](mailto:jbouchard@healthdesign.org)

Questions? Call Peggy Denton or Callie Fahsholz at 925-521-9404.

