

Central Ohio Branch of the
 American Association of Laboratory Animal Science
 Membership Application



Applications can be filled out/printed and paid for at www.cobaalas.org/membership e-mail completed apps to:

jennifer.hess@nationwidechildrens.org

Check payments and applications can be mailed to Jen as well. Contact above e-mail for mailing address.

Make checks payable to COB AALAS

<u>Membership Level</u>	<u>Dues</u>
Student	\$15
Individual/Non-certified	\$35
Assistant Technician (ALAT)	\$35
Technician (LAT)	\$35
Technologist (LATG)	\$35

_____	_____
Member name, Certification level	Job title, Institution
_____	_____
Mailing address	City, State, Zip
_____	_____
Email address	Phone

Renewal New Member *Sponsorship by a member in good standing is required for new memberships

_____	_____
Sponsor name	Sponsor signature

Are you a member of National AALAS? Yes No If yes, please list member #: _____

Please indicate any committees you are interested to serve on:

Awards Events Elections Membership Publicity 2024 D5 Meeting Planning

COBAALAS Annual Membership is from January 1 through December 31.
 Membership fees and application are due by March 1

If you do **NOT** grant permission to COBAALAS to print pictures containing your image in any communications please initial here. _____

For membership committee use only:
Date received: _____ **Calendar year:** _____ **Check number:** _____ **Amount:** _____

Payment Type: _____