

# STUDENT ASSOCIATE MEMBERSHIP INFORMATION & APPLICATION



## Who is eligible for student associate membership?

Undergraduate or graduate students who are conducting research or interested in pursuing a career in the energy industry

## Benefits include

- One subscription to *Public Power Daily* newsletter
- One subscription to *Public Power* magazine, in print or electronic format
- One complimentary copy of the *Annual Directory & Statistical Report*
- Limited access to “members-only” online resources.
- Access to the Association’s professional staff

## Dues

Annual dues are \$50. Membership begins on the first day of the first month following receipt of your dues payment.

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## Contact Information

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Name

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Title

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Company

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Address

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City State Zip

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Telephone Fax

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Email

## Agreement

To become an associate member of American Public Power Association, applicants must sign the following statement of support: I confirm that I support the rights of communities to establish and operate local, government-owned electric utilities and recognize the significant and positive role public power plays in the electric utility industry today in the future. I also understand that by providing my contact information, I am authorizing the Association to send notices to me about programs and services.

Except specifically noted in this agreement and for the limited purpose of performing the obligations under this agreement, neither party shall use other party's logo or name for the marketing or any other purposes without obtaining prior written approval of that party.

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Contact Signature Date

## Payment Information

All fees to be paid in U.S. funds.

- I am paying via Wire/ACH payment.  
Please have an Association finance employee contact me.
- I am paying via check.  
I will mail the application form and a check payable to **American Public Power Association** to:  
American Public Power Association · P.O. 418617 · Boston, MA 02241-8617
- I am paying via credit card  
I will fax (202.495.7503) or email (Membership@PublicPower.org) my application form.  
 Visa       MasterCard       American Express       Discover

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Card number Expiration Date

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\$ Amount to charge to card

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Name as it appears on card Cardholder signature

## Questions?

Contact Membership@PublicPower.org or 202.467.2926.