



**NORTH
CENTRAL
CHAPTER**

**APPLICATION FOR
AFFILIATE MEMBERSHIP**

Company	
Web Site	
Midwest Representative	
Phone	
Fax	
E-mail	
<p>Briefly explain your interest in radiation protection and/or service provided which would interest the NCCHPS membership.</p>	
<p>Listing of information on your products and services on the NCCHPS web site is included in the annual dues. Provide that information below. You may e-mail the listing information to Jesse Fillmore at jesse.fillmore@state.mn.us</p>	

ANNUAL DUES OF \$25 SHOULD ACCOMPANY THIS APPLICATION.

Make checks payable to: **North Central Chapter, Health Physics Society.**

Forward form and dues to:

Jesse Fillmore
Minnesota Department of Health
601 Robert Street North, Public Health Laboratory
St. Paul, MN 55155

Executive Council Approval

