healthy

#### NYSPHA's Mission

NYSPHA is a statewide organization working to improve the public's health and to achieve equity in health status for all. We promote "best practice" in public health and advocate public policies to promote healthy people in healthy communities. NYSPHA emphasizes prevention and enhances the ability of individual and organizational members to promote and protect environmental and community health.



Stuyvesant Plaza Station P.O. Box 38127 Albany, NY 12203



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healthy

# Envisioning healthy people in healthy communities—

# throughouthealthy New York State.

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#### Are you interested in...

- Increasing access to health care?
- Promoting healthy lifestyle changes and healthrisk reduction?
- Promoting a safe environment that supports healthier behaviors?
- Mobilizing New Yorkers to identify and solve community health problems through information, education and empowerment?
- Promoting a competent public health workforce?

#### ...Then join NYSPHA.

The New York State Public Health Association (NYSPHA) is one of the oldest, independent, nonprofit, non-governmental public health organizations in the United States. It is the only broad-based New York State organization exclusively devoted to promoting and protecting the public's health.

As an affiliate of the American Public Health Association (APHA), NYSPHA works to influence policies at the regional, state and national levels. NYSPHA strives to promote health and prevent disease, injury, and disability. NYSPHA represents all disciplines, consumers and specialties in the public health spectrum.

New York State Public Health Association Stuyvesant Plaza Station, P.O. Box 38127 Albany, NY 12203 Email: info@nyspha.org Web: www.nyspha.org Phone: 518.427.5835

### Get the benefits of membership:

- Membership in a statewide network of public health professionals, and the opportunities to interact with others in the field.
- Leadership and professional advancement opportunities.
- An established communications link to the New York State policymakers through active, issue-oriented committees.
- The ability to promote public health training, education and events for free by submitting them to our website.
- Registration discounts at the NYSPHA Annual Meeting, workshops and webinars.
- The opportunity for your voice to be heard as a public health advocate.
- Access to the members-only section of our web site with job announcements and public health networking lists.
- Tuition discount at Walden University

#### Membership Levels

In addition to individual, organizational and student memberships, we also offer the following membership levels:

- Early Career Professional/Transitional Membership - Person who graduated in the last 24 months and is transitioning into the workforce. Person who has retired and no longer derives income from current work-related activities.
- Group Membership- A group of 4 health professionals who join together for this discounted rate
- College/University Membership -Degree granting, accredited not-for-profit institutions of higher educations. 25 students plus 1 faculty of the college/university are eligible for membership at this discounted fee. College/University becomes an institutional member with each annual renewal and may operate a student chapter.

## Make Your Voice Be Heard!

Name:	
Title:	
Affiliation or organization:	
Address:	
Telephone:	
E-mail:	
County:	
Help NYSPHA be more effective in education, training and advocacy. Make a donation today.  Are you a member of APHA? ☐ Yes ☐ No	
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	xe a donation today. ? ☐ Yes ☐ No
Are you a member of APHA	xe a donation today. ? ☐ Yes ☐ No oer:
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Are you a member of APHA  If yes, your APHA numb Your NYSPHA membership I  Full-time Student Early Career/Transitional Individual	xe a donation today. ?
Are you a member of APHA  If yes, your APHA numb Your NYSPHA membership I  Full-time Student Early Career/Transitional Individual  Organizational*	Re a donation today.  ?
Are you a member of APHA  If yes, your APHA numb Your NYSPHA membership I  Full-time Student Early Career/Transitional Individual Organizational*  Group Membership*	xe a donation today. ?

\* Please include a sheet listing the additional members.

#### Please return this **application with your** check (made payable to NYSPHA) to:

NSPHA attn: Membership P.O. Box 38127 Albany, NY 12203





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