

PAPOR

Pacific Chapter of American Association for Public Opinion Research

PAPOR Membership Form

Membership year is January through December. Information marked with an asterisk is required.

Personal Information

Honorific (Dr/Mr/Ms etc) _____ Highest Degree (Ph.D etc.) _____

Name _____

Name of Employer/business/university _____

Address 1 _____

Address 2 _____

City, State, Zip _____

Phones (home) _____ (mobile) _____

Main contact email* _____

Alternate contact email: _____

Primary Professional Affiliation

Please circle one: ☐ Academic ☐ Commercial ☐ Government ☐ Non-profit
☐ Retired ☐ Other _____

Code of Ethics (www.aapor.org/AAPOR_Code.htm)*

All AAPOR and chapter members are required to read and adhere to the AAPOR code of ethics statement. Please verify that you have read the code and agree to abide by its tenets, by checking the box below.

☐ I have read, and agree to abide by, the AAPOR code of ethics

Date: _____

Indicate your membership type and then your membership status.

☐ Regular (\$20) ☐ Regular - after Dec 1 to Dec 31 (\$30) ☐ Student (\$12)
☐ New member ☐ Renewing member ☐ Lapsed member (member within the last three years)

☐ Yes I am a member of AAPOR, AAPOR Membership Number: _____

Are you paying your fee now, or have you already paid?

- ☐ Paying now
☐ Paid annual membership fee through AAPOR membership (Change of Information only)
☐ Paid annual membership fee directly online or some other way (Change of Information only)

**Send form and check
made to PAPOR to:**

PAPOR
P.O. Box 1661
Orem, UT 84059

Thank you for your interest in PAPOR! Newsletters, Announcements and Updates at PAPOR.org