



**CURRENT APPLICATION**

Describe Your Position/Responsibilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CERTIFICATION INFORMATION**

Certification Number: \_\_\_\_\_  
CHMM Level:  Master Level  Senior Level  Haz. Materials Manager-In-Training

**GRADES OF MEMBERSHIP AVAILABLE**

<input type="checkbox"/> <b>Voting Member: \$35</b> Senior and Master CHMM	<input type="checkbox"/> <b>Student Member \$15</b> A full-time student at an accredited college, university or institution
<input type="checkbox"/> <b>Affiliate Member \$35</b> A professional in the field of hazardous materials management who is not CHMM	

**SIGNATURE**

The undersigned applies for membership in the Alabama Society of Hazardous Materials Managers and certifies that all statements made in this application are correct and, if elected to membership, agrees to abide by the Society Bylaws and Code of Ethics.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Make checks payable to: **ASHMM**

Mail to: **ASHMM**  
c/o **Linda Zander**  
**629 Mill Springs Court**  
**Birmingham, AL 35244**

The membership renewal schedule operates on a calendar year basis. You must attend 2 or more meetings per