

## Membership Application/Renewal

Thank you for your Membership application/renewal for the New Mexico Association for Infant Mental Health. We appreciate your support and value your membership in our organization. As you know, we depend on your membership dues to help keep our organization sustainable and functioning. Your participation and input are very important to us. We could not exist without your membership or your input. We are also very open to feedback from our members, and comments or concerns may be sent to the Administrative Assistant at admin@nmaimh.org, at any time during the year.

Please print this page and return it to us by mail along with your membership dues. Membership dues can also be paid through PayPal on the NMAIMH website: <a href="http://www.nmaimh.org">http://www.nmaimh.org</a>

Name:				
Address:				
City:		State:	Zip:	
Telephone:		_Alternate Phone:		
*E-mail Address:				
Profession/Position:			Member of WAIMH?	Yes 🗖 No 🗖
* Your e-mail will be added to the N	MAIMH Members listserv. V	Ve do not share our ema	ail list with anyone.	
*Check here if you do not	want email from listserv			
Membership Category	Dues			Amount Enclosed
Regular Membership	\$45.00			\$
Regular Membership Student Membership				
	\$15.00	.Please attach copy of y	our current Student ID	\$
Student Membership	\$15.00tion to NMAIMH	.Please attach copy of y	our current Student ID	\$
Student Membership  Please add my tax deductible contribu	\$15.00tion to NMAIMH	.Please attach copy of y	our current Student ID	\$

Mail to:
NMAIMH
630 Manzano St. NE, Suite B
Albuquerque, NM 87110
Fax: 1-866-800-9776 (if using PayPal to pay dues)
Email: admin@nmaimh.org