

Association of Graduate Regulatory Educators (AGRE)

Institutional Membership Form

Annual Dues: \$250 (US)

Please make checks payable to AGRE and submit to the AGRE secretary

Institutional members may appoint two voters who each need to fill out and submit the information form on the following page. Voter information forms must reach the AGRE secretary by one week prior to ballot distribution. The institution may change an appointed voter by notifying AGRE and the prior and succeeding voter, with the new voter's information form reaching the AGRE secretary by one week prior to ballot distribution.

Regulatory Program Information

Program name

Website

Mailing Address

City, State & Zip

Country

Program Contact Information

Title

Dr., Mr., Ms., Mrs.

First Name

MI

Last Name

Phone

Cell Phone

Email

Do you want the program information listed in the AGRE Directory. Please note that if you do not answer "yes", your information will not be included in the Membership Directory.

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Do you give AGRE permission to send the program meeting announcements, membership notifications, and newsletters by email? (We are incorporated in Washington state, which requires that permission be received for AGRE to send materials like these by email. Please answer "yes".)

- Yes
 No

Voter # 1 Information

Title

Dr., Mr., Ms., Mrs.

First Name

MI

Last Name

Certifications

Role in program

Voter # 1 Contact Information

Mailing Address

City, State & Zip

Country

Phone

Cell Phone

Email

Do you want the program information listed in the AGRE Directory. Please note that if you do not answer "yes", your information will not be included in the Membership Directory.

Yes

No

Yes

No

Voter # 2 Information

Title

Dr., Mr., Ms., Mrs.

	First Name	MI	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Certifications

Role in Program

Voter # 2 Contact Information

Mailing Address

City, State & Zip

Country

Phone

Cell Phone

Email

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- Yes
 No

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