Public Safety Practitioner MEMBERSHIP APPLICATION

Commercial members use application at: www.apcointl.org/commercial-application			
NAME	TITLE		
ORGANIZATION	AMAT	AMATEUR CALL SIGN	
ORGANIZATION ADDRESS			
CITY	STATE	ZIP	
EMAIL	PHONE		
HOME ADDRESS			
CITY	STATE	ZIP	
PRIMARY ADDRESS: HOME WORK REFERR	RED BY		

FUTURE INVOICES: DILL ME DIRECTLY ADD TO AGENCY BILL CODE

INDIVIDUAL MEMBERSHIP

□ Full Member: Tier One—\$104 USD

Individuals who are employed by or retired from a government entity or a contractor of a government entity and are responsible for the man-agement, design, construction, installation, command, and operation of public safety communications systems and supporting information systems. Includes voting privileges.

□ Full Member: Tier Two—\$136 USD

Applicants as defined above in Tier One residing in California, Louisiana and Oregon are to select this Tier. (Note: Tier selection/membership dues are set by each respective Chapter.)

□ Associate Member—\$79 USD

Individuals who perform non-administrative and/or non-supervisory functions within their agency. Associate members do not have voting privileges.

□ Additional Chapters:

Persons residing and/or permanently employed in the chartered area of a Chapter are required to be members of such chartered Chapter. Members belonging to one Chapter may become a member of any other Chapters. Please list the additional Chapters by name:

Additional Tier 1 Chapters	× \$19.20
Additional Tier 2 Chapters	×\$48.20
	Total Due

AGENCY MEMBERSHIP		
Membership Levels	Tier 1	Tier 2 (CA, LA, OR)
Level One (Up to 10 staff)	□ \$375	□ \$469
Level Two (11 to 25 staff)	□ \$972	□ \$1,226
Level Three (26 to 50 staff)	□ \$1,788	□ \$2,265
Level Four (51 staff and above)	□ \$2,615	□ \$3,314

Please provide a primary contact to oversee your group membership. PRIMARY CONTACT (agency membership only)

NAME

EMAIL _

MEMBER PROFILE

Agency Category — please sel	ect one that best fits:
Campus Police	Fire Department
Consolidated Comm Center	Government Agency

- Emergency Comm Center □ Law Enforcement
- Emergency Management Police □ Other_
- □ EMS

Job Classification — please select one that best fits:

- 9-1-1 Coordinator □ Information Systems C-level □ Manager □ County/State Official □ Public Safety Telecommunicator ☐ Sheriff
 ☐ Supervisor
 ☐ Training & F Director Engineer Engineer/Technician
 - Training & Education Coordinator Fire Chief Other_
- Government Official □ Officer

□ Check enclosed #		□ AMEX □ DISCOVER	□ MASTERCARD □ VISA
CARD NUMBER			
EXPIRATION DATE	/	_ SECURITY CODE	
SIGNATURE			
PRINT NAME			

CARDHOLDER'S EMAIL

Mail completed application with payment to: **APCO International Membership** 351 North Williamson Blvd., Daytona Beach, FL 32114

Your membership will be activated upon full payment of applicable dues.

*Note: APCO International annual dues are not a deductible contribution for federal tax purposes, but may be deducted as a business expense. PSC magazine subscription price for one year is included in membership dues and members may not deduct the subscription price from dues.

By signing this document, I am signifying that I have read and accept the terms on the back, and agree to APCO's use of my personal information. APCO's privacy policy can be found at www.apcointl.org/privacy-policy-data-usage. I understand that failure to sign the form will result in no further processing of my data, and no transactions taking place.

SIGNATURE

DATE_____

PRINT NAME

APCO DATA COLLECTION AUTHORIZATION

The new European Union (EU) General Data Protection Regulation (GDPR), state and federal regulations are compelling organizations across the globe to modify their data processing requirements. A key change is that individuals must provide consent to the collection of their personal information and they have expanded rights as individuals to control the use and storage of their personal data.

In order to process your request or transaction, APCO International will be asking to collect some personal information from you which may include your name, email, phone number, organizational affiliation and postal address. APCO uses the personal data it collects to provide you with the service that you have requested, or to respond to an inquiry that you have made.

More generally, APCO uses the personal data it retains on individuals to help them compile their professional record with APCO so as to demonstrate engagement in the profession, support their career advancement and validate their association service, including eligibility for honors such as Senior and Life member. APCO may also use such personal data to determine user interests, needs and preferences, conduct research and analysis, manage and maintain the sites and our services, comply with our legal obligations, resolve disputes, protect our assets and enforce our agreements.

APCO is committed to keeping your data safe. As part of our business operations we maintain appropriate security measures to prevent security breaches and unauthorized disclosure of client data. Any financial data requested and transmitted through our sites are transmitted using SSL (Secure Socket Layer) encryption.

Like many websites, our sites set and use cookies to enhance your user experience, such as retaining your personal settings. By using our sites, you consent to the use of cookies and log files.

Go to www.apcointl.org/privacy-policy-data-usage for more details on APCO's privacy, data retention, disclosure, security and cookies policies.

Signing the front of this application hereby acknowledges that you have read and understand APCO's policies as they relate to your data, and that you understand your right to withdraw consent. It is important to note that you are prohibited from completing this form on behalf of anyone else.