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| **Organization**  **Name** | **Date:** | |
| **Mailing address** | Street | |
|  | City/State/Zip/Country | |
| **Primary Contact** | Name/Title | |
|  | Email address | |
| **Primary Contact Mailing Address** | Street City/State/Zip/Country (If different) | |
|  | Telephone Mobile | |
| **Profession/Discipline**  (Check all that apply) | \_\_ Animal Science \_\_ Architecture/Design \_\_ Biological Engineering \_\_ Business/Commerce  \_\_ Chemistry \_\_ Communications/Media \_\_ Ecology/Wildlife \_\_ Environmental Science  \_\_ Engineering \_\_ Genetics \_\_ Human Medical Science \_\_ Human Science \_\_ Nutrition/Wellness  \_\_ Informatics \_\_ Physics\_\_ Plant Science ­­\_\_ Public Health \_\_ Social Science \_\_ Transportation  \_\_ Veterinary Medical Science \_\_ Other (Specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **Sponsorship Level for Year \_\_\_2022\_\_\_\_\_\_** | \_\_\_\_ **Vanguard**/$10,000 + \_\_\_\_ **Leader**/$5,000 \_\_\_\_ **Promoter**/$2,500 \_\_\_\_\_ **Supporter**/$1,000    \_\_\_\_ Other Amount \_\_\_\_\_\_\_\_\_\_\_ OHC Activity/Webpage(s) on which to display your logo as a sponsor. \_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **Payment Information** | \_\_ Check enclosed (Please make payable to “One Health Commission”)  \_\_ Institutional Purchase Order Needed (Please include instructions for where to send Invoice)  \_\_ Donating via PayPal on Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (PayPal fees will be deducted) | |
| **Areas of Expertise**  **for Working Groups**  (Check all that apply) | \_\_Antimicrobial Resistance  \_\_Chronic Diseases (i.e. cancer, obesity, etc)  \_\_Communications and Outreach  \_\_Disaster Preparedness and Response  \_\_Ecosystem Health (wildlife, environment)  \_\_Environmental Agents (Detection/Response)  \_\_Food Safety and Security  \_\_Human-Animal Bond | \_\_Infectious Diseases (surveillance, prevention, response)  \_\_Interdisciplinary Education and Training  \_\_Interdisciplinary Research (basic and translational)  \_\_ Plants  \_\_Public Policy and Regulation  \_\_Water Safety and Security (Diseases and Supply)  \_\_Other (Specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Additional Contact**  *Will receive newsletter and other notices- please encourage others to add themselves to listserv* <https://tinyurl.com/OHC-OH-CommListserv> | Name/Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Telephone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **Additional Contact** | Name/Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Telephone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

Mail form and payment to: **One Health Commission, P.O. Box 972, Apex, North Carolina, 27502**

Or Mail this registration form then Donate online at <https://goo.gl/EWp7Yk>

Questions? Call 984-500-8093 or email [cstroud@onehealthcommission.org](mailto:cstroud@onehealthcommission.org)