



Join other professional and student members to:

- Become a KASH Advocate. The goals and directives of KASH involve active participation and advocacy for change.
- Participate in the annual KASH Spring Conference. The conference features hands-on experiences from state and national experts that you can easily apply at your worksite.
- Be informed through the KASH newsletters and website (<http://www.kyschoolhealth.org>). The *KASH Register* newsletter is published and distributed to members quarterly. Our newsletters and website include pertinent information on current social and political issues, legislative developments, and trends that may affect schools, education, and health, at the local, state, and national levels. They also inform you of how the KASH Board continues to advocate and work throughout the year for school health in Kentucky. Recognize outstanding efforts by individuals and organizations who have made significant contributions to school health issues in Kentucky.
- Network and learn from other members during KASH's meetings, workshops, conferences, and through the newsletters.

KASH Membership Application

Last Name _____ First Name _____ Ms./Miss/Mrs./Mr./Dr. _____

Home/Work Address (please circle) _____

City _____ State _____ Zip _____

Daytime Phone Number _____ Fax Number _____

E-mail Address _____

Place of Employment (or Name of School if student member) _____

Type of occupation: (please select one)

- | | |
|--|----------------------------------|
| <input type="checkbox"/> School Health Educator | <input type="checkbox"/> Nurse |
| <input type="checkbox"/> Public Health Educator | <input type="checkbox"/> Student |
| <input type="checkbox"/> Family Resource/Youth Service Coordinator | |
| <input type="checkbox"/> Other (please list) _____ | |

Membership:

- | | |
|--|---|
| <input type="checkbox"/> Full-time Student \$5 | <input type="checkbox"/> New Member |
| <input type="checkbox"/> Professional \$30 | <input type="checkbox"/> Membership Renewal |
| <input type="checkbox"/> Group \$100/4 members | |

Were you recruited by a KASH member? If so, by whom? _____

Check all activities that best suit your talents and commitment to KASH's goals:

- | | |
|---|------------------------------------|
| <input type="checkbox"/> Planning | <input type="checkbox"/> Research |
| <input type="checkbox"/> Advocacy | <input type="checkbox"/> Resources |
| <input type="checkbox"/> Professional Development | <input type="checkbox"/> Website |

Web02

Return this form with payment to:

Kentucky Association for School Health
Jim Tackett, Treasurer
590 Whetstone Creek Road
Eubank, KY 42567