

# AJA Membership Application



The American Jail Association is a national, nonprofit organization dedicated to serving those who work in and operate our Nation's jails. We accomplish this by providing training and professional development, educational resources, personal certification, publications, networking opportunities, and advocacy at State and national levels—all designed to increase professionalism in the field and to help jails and detention facilities be safer for both staff and inmates.

Fax to 301-790-2941 or e-mail to [membership@aja.org](mailto:membership@aja.org). Once the application is received and processed, you will receive a new member packet.\* For additional information, visit [aja.org](http://aja.org).

Please place an "X" in the type of membership:\*\*

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Professional Membership (U.S.) \$48<br><small>(For those individuals working in a jail facility)</small>  | <input type="checkbox"/> Canadian \$54   | <input type="checkbox"/> International \$66            |
| <input type="checkbox"/> Life Member—\$500 (single or pro-rated)   | <input type="checkbox"/> Single payment  | <input type="checkbox"/> Four Annual payments of \$125 |
| <input type="checkbox"/> Student Membership—\$15 (U.S. only)<br><small>(Available to full-time students not currently employed in the field of corrections—include copy of full-time student ID)</small> | Graduation Date: _____   |  |
| <input type="checkbox"/> Subscription to <i>American Jails</i> magazine only—\$88  | <input type="checkbox"/> Affiliate Membership—\$100<br><small>(Private, nonprofit organizations—evidence of nonprofit status must accompany application)</small> |  |
| <input type="checkbox"/> Retiree Membership—\$36 (U.S. Only)   |  |  |

## Areas of Concentration

Choose only one:

- Administration
- Chaplaincy
- Classification
- Food Service
- Human Services
- Inmate Programs
- Intake and Release
- Juvenile
- Law Enforcement
- Medical Care
- Mental Health
- Information Systems/Technology
- Substance Abuse Counselor
- Training
- Volunteer
- Other

Name: \_\_\_\_\_ Rank: \_\_\_\_\_

Job Title: \_\_\_\_\_ Certifications: \_\_\_\_\_

Send my magazine and new member packet to:  Home Address  Work Address

Address: \_\_\_\_\_ Suite/Apt. #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: Office: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Agency: \_\_\_\_\_

Agency Address: \_\_\_\_\_

Facility Name and Address: \_\_\_\_\_

E-mail Address (required): \_\_\_\_\_

I was referred by: \_\_\_\_\_ His/Her agency is: \_\_\_\_\_

Gender:  Male  Female  Birth Month: \_\_\_\_\_  Year Graduated High School: \_\_\_\_\_

Education:  High School Graduate  Associate's Degree  Bachelor's Degree  Master's Degree  Doctorate

Year you entered the field of corrections: \_\_\_\_\_ Rate of Capacity: \_\_\_\_\_

Agency Category:  Federal  State  County  Other \_\_\_\_\_

Have you previously been a member of AJA?  Yes  No

How did you learn about AJA?  Internet  *American Jails* magazine  Mailing  AJA Conference or Training Event  
 AJA Member  Other \_\_\_\_\_

## Interests:

- Cars
- Cooking
- Crafting
- Fitness
- Gardening
- Hunting/Fishing
- Music
- Outdoor Recreation
- Photography
- Reading
- Sports
- Traveling
- Other

Payment Type:  Check  Purchase Order  Credit Card (Circle one) *VISA MasterCard American Express Discover*

(Payable to the American Jail Association in U.S. funds drawn on a U.S. bank)

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Verification on Back: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_ Signature: \_\_\_\_\_

\*Membership fee is nonrefundable and nontransferable. \*\*Membership contact information is accessible to AJA staff and other AJA members.

**Please remit payment to: American Jail Association, PO Box 65048, Baltimore, MD 21264-5048**