



## Request for Emeritus Member Status

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

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

Phone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Member ID: \_\_\_\_\_

I have retired from the Animal Science profession. As of \_\_\_\_\_, I no longer plan to actively practice or pursue any professional activities associated with Animal Science, including consulting. As a result of my retirement, I hereby request that my membership with the American Registry of Professional Animal Scientists, ARPAS, be changed to an Emeritus membership.

As an Emeritus member, I elect: *(Please choose one of the following)*

To pay dues at one-half the rate of a regular Full Membership. Currently, this amount is \$42.50

***or***

A lifetime Emeritus membership. With a lifetime membership, I will pay a one time fee equal to three times the current annual Full Membership rate. Currently, this amount is \$255.00\*

*\*Please note: This option may be elected at any time in the future; however, previous annual payments will not apply.*

In addition to the electronic version of the *Professional Animal Scientist* provided with my membership, I wish to receive a paper copy of each journal. I agree to pay the additional, yearly fee as set by the Governing Council. Currently, the fee is \$100.00 per year.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

***All checks should be made payable to "ARPAS"***

*Please return completed forms to the business office at 2441 Village Green Place, Champaign, IL 61822.  
Questions concerning the form or Emeritus Member status can be directed to 217-356-5390 or  
arpas@assochq.org*