The Arkansas Public Health Association (APHA) is committed to protecting the health of Arkansas. Through our partnerships, collaborations and membership, APHA is the voice for public health in Arkansas. From those who have chosen public health as a career to those who just want to make a difference in the health of their communities, APHA offers an opportunity to promote and support public health from all levels. If you aren’t a member, we encourage you to join us in our efforts. Everyone has a stake in public health!

The Arkansas Public Health Association (APHA) is an affiliate of the American Public Health Association, Inc. The membership of the APHA is made up of individuals from public health disciplines, as well as persons interested in the advancement of public health.

E: secretary@arkpublichealth.org
PO Box 250327
Little Rock, Arkansas 72225

Like us on Facebook
www.arkpublichealth.org

An affiliate of

AMERICAN PUBLIC HEALTH ASSOCIATION
For science. For action. For health.
APHA is for YOU!

Do you work in a health profession?
Do you care about the health of your community?
Are you interested in learning more about public health issues?
Would you like to be proactive on health legislation?
Would you enjoy networking with others on a variety of public health concerns?

Yes, enroll me in payroll deduction at ADH.

We need your voice and your leadership!

APHA sections (may require additional dues)
- Protection of the Public Health
- Nutrition
- Health Promotion
- Health Disparities
- Health Education and Promotion
- Public Health Preparedness
- Health Administration
- Infectious Disease
- Health Professions
- Public Health Nurses
- Arkansas Professional Sanitarians
- Health Literacy
- Environmental Health
- Arkansas Department of Health

APHA also offers organizational/corporate memberships. Please see our website for more details.

Name: __________________________________
Address: ________________________________
City: _____________________________________
State: __________  Zip: ___________________
Organization Name: ____________________
________________________________________

Preferred Contact Information
Email: ___________________________________
Phone: __________________________________
Cell: _____________________________________

If you are an Arkansas Department of Health employee, you can use the state payroll deduction plan of $1 per pay period. Please provide your AASIS number and sign below to enroll.

AASIS #: _______________________________

Signature: ________________________________

APPLICATION

We need your voice and your leadership!

MISSION

APHA members aspire to exercise leadership in protecting and promoting personal and environmental health.
APHA represents you and your level of government as well as to industry and the general public.
APHA helps shape health policies.
APHA provides you with the opportunity to contribute in solving state and local public health problems.
APHA provides opportunities for professional development.
APHA alerts you to critical trends and changes in public health policy that may affect your career.
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If you answered yes to one or more of these questions...
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Signature: ________________________________