

REQUEST FOR RECLASSIFICATION TO MEMBER EMERITUS

TO: CAT Board of Directors:

I, _____, hereby apply to be reclassified as a Member Emeritus. I certify that:

_____ I am a Charter Member in good standing and at least 60 years old. I am retired from the toxicology profession.

OR

_____ I am a Full Member in good standing with 20 years or more uninterrupted CAT membership. I am at least 60 years old and am retired from the toxicology profession.

My date of birth is _____

_____ Charter/Full Member Signature

Address: _____

Phone Number: _____ FAX: _____ E-mail: _____

Benefits: Member Emeritus is excused from payment of annual dues yet retains full membership privileges. A Member Emeritus, however, does pay one-half of any registration fee at Quarterly Meetings and Workshops.

Member Emeritus status must be applied for and granted. Failure thereafter to send in a yearly certification of retired status (due by July 1 dues deadline) automatically results in revocation of Member Emeritus status. (An application/certification for Member Emeritus will be part of the annual dues request form.)

Please Return Completed Form To:

Ed Smith, CAT Membership Secretary
PO Box 2032
Fair Oaks, CA 95628

Phone: 916-366-3113
Fax: 916-366-3917

OFFICIAL USE ONLY

Date Application Received _____

Committee Reviewed _____

Board Approved _____

Membership Notified _____