

# Healthy Teen Network Membership Application Form

## Section I. Contact Information

Contact Name	Title
Organization	Department/Program
Mailing Address	
City	State                      Zip
Work Phone	Fax                      Home/Cell

Email  Check here if you do **NOT** wish to be on the HTN listserv

**Organizational Members Only**- All Healthy Teen Network administrative correspondence will be directed to the person listed in the previous section. In this section, name two other individuals who shall also receive membership benefits.

<b>Member 2 Name</b>	<input type="checkbox"/> Check here if you do <b>NOT</b> wish to be on the HTN listserv
Email	
<b>Member 3 Name</b>	<input type="checkbox"/> Check here if you do <b>NOT</b> wish to be on the HTN listserv
Email	

## Section II. General Information (for primary contact only)

<b>Education</b>	<input type="radio"/> Associate	<input type="radio"/> Bachelor	<input type="radio"/> Master	<input type="radio"/> Doctoral
<b>Profession</b> (please check all that apply)	<input type="radio"/> Administration	<input type="radio"/> Counselor	<input type="radio"/> Doctor	<input type="radio"/> Researcher/Evaluator
	<input type="radio"/> Policy/Advocacy	<input type="radio"/> Teacher	<input type="radio"/> Nurse	<input type="radio"/> Programmatic Services
	<input type="radio"/> Executive Director	<input type="radio"/> Social Worker	<input type="radio"/> Midwife	<input type="radio"/> Direct Service Provider
	<input type="radio"/> Health Educator	<input type="radio"/> Other (specify) _____		

**How did you hear about us?**

<input type="radio"/> Exhibit Booth	<input type="radio"/> Internet
<input type="radio"/> HTN Conference	<input type="radio"/> Word of Mouth
<input type="radio"/> HTN Publication	<input type="radio"/> Advertisement
<input type="radio"/> Email Sent by HTN	
<input type="radio"/> Other _____	

## Section III. Membership Type and Duration

**Form Type**  New                       Renewal                       Information Change

- Organizational** | Provides benefits for up to three individuals. Changes to organizational memberships must be made in writing.
- Individual** | Individual memberships are non-transferable.
- Student** | Documentation of full-time enrollment (>8 credits) is required.

Membership Options	1 year	2 years	3 years	Amount
Organizational	\$250	\$470	\$700	_____
Individual	\$100	\$185	\$275	_____
Student	\$30	x	x	_____
<i>Prevention Researcher</i> Subscription	\$31 (discounted)	x	x	_____
Donation	x	x	x	_____
<b>TOTAL</b>				

## Section IV. Method of Payment

Membership will not be processed until payment or PO is received.

- Signed Purchase Order is attached
- Check or money order, payable to: **Healthy Teen Network**
- Credit Card
  - Visa
  - Mastercard

**NOTE:** You may fax your form to the HTN office and then call to give your credit card information or to make sure that your application was received. If you choose this option, please be sure to include the last 5 digits of your credit card on this form along with expiration date, authorization code and dated signature.

Credit Card #	Expiration Date
Signature	Authorization Code

# Healthy Teen Network Member Benefits

Healthy Teen Network is the **ONLY** national professional organization that focuses solely on adolescent reproductive issues with an emphasis on adolescent pregnancy, pregnancy prevention, and parenting.

Coming in 2006

MTV Networks and Healthy Teen Network have collaborated to provide free MTV produced educational videos with HTN produced guidelines to our members.

Four annual **Print Publications** on cutting edge topics affecting the field.

National **Policy Statements** which serve as templates for state and local action on important issues identified by our membership.

Weekly **Email Newsletters** with the latest information on news, research, policy, events and funding opportunities.

**Voting Rights** for organizational actions, including electing HTN Board Members.

Healthy Teen Network's website offers organizational information and important links to other related materials. **Look for a members-only section with expanded resources in 2006.**

Healthy Teen Network's **Annual Conference** consistently brings together 550-850 people in the field. HTN's conference is the only national annual conference solely devoted to the issues of teenage pregnancy, parenting and prevention.

Committees that offer numerous ways to become involved in the **National Discussion**.

**Annual Awards** recognizing outstanding teen parents, professionals and programs across the country, presented at the Annual Conference.

NEW

**Optional Benefit: Healthy Teen Network provides *The Prevention Researcher* to its members at a 15% subscription discount rate (\$31/year). *The Prevention Researcher* is a quarterly journal providing evidence and results-based research articles focused on adolescents that are applicable for real-life situations.**

State and Local Coalitions that address adolescent pregnancy, parenting and prevention are supported by our **Directory** of over 150 key contacts and projects guided by Healthy Teen Network's State Coalition Training and Advisory Team.

**Our members include over 600: health educators, nurses, physicians, psychologists, social workers, teachers, school and program administrators and policy-makers as well as state and local health departments, school districts, community programs and educational agencies.**



**Healthy Teen Network**

MAKING A DIFFERENCE IN THE LIVES  
OF TEENS AND YOUNG FAMILIES

**Discounts and scholarships** to training events, including Healthy Teen Network's Annual Conference, as well as on Healthy Teen Network publications.

An **Electronic Clearinghouse** of research, programs, and other information pertaining to teen pregnancy, parenting and prevention.