



EDUCATION PROFESSIONALS are those persons who are full time educators for Hospitality Studies, to include Architecture, Asset Management – Hospitality Industry Studies, Culinary Arts, Environmental Design, Food Service Management, Hospitality & Restaurant Management, Hotel Administration, Interior Design, International Hotel Management, Nutrition Management, Tourism & Convention Administration, and Travel & Tourism.

# EDUCATION PROFESSIONAL COURTESY APPLICATION

chapter/region affiliation:

please complete application and mail/email to: **NEWH Membership**  
**PO Box 322**  
**Shawano, WI 54166**  
**newh.membership@newh.org**

## personal information:

last name: <input type="text"/> first name: <input type="text"/> middle initial: <input type="text"/> date of birth: <input type="text"/> spouse/ significant other: <input type="text"/>	home address: <input type="text"/> apt: <input type="text"/> city: <input type="text"/> state: <input type="text"/> zip: <input type="text"/> phone: <input type="text"/> personal email: <input type="text"/>
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**mailing preference:**    **home:**     **business:**

## professional information:

<b>YEAR</b> entered industry: <input type="text"/> department: educational <input type="text"/> focus: <small>brief description for use in Membership Directory</small> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> Are you a full-time instructor? <input type="text"/>	position: <input type="text"/> school: <input type="text"/> address: <input type="text"/> suite: <input type="text"/> city: <input type="text"/> state: <input type="text"/> zip: <input type="text"/> phone: <input type="text"/> alt. phone: <input type="text"/> fax: <input type="text"/> cell: <input type="text"/> business e-mail: <input type="text"/> web address: <input type="text"/>
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### Statement of Applicant

In applying for membership in the NEWH, Inc., I attest to the accuracy of the information in this application and will do all within my power to maintain and enhance the integrity and prestige of NEWH, Inc.

signature:       date:

please submit photo for Membership Directory - **email a digital photo to newh.membership@newh.org - be sure to include your name in the email**  
**By submitting your photo, you are agreeing to allow NEWH, Inc. to use it for promotional purposes**

*The information provided on this application is confidential and will not be given, sold or rented to any organization, business, etc. Only your business information will be included in the NEWH, Inc. Membership Directory. By applying for NEWH membership, you are agreeing to opt-in to NEWH email, and agree to the NEWH Code of Ethics, Photo Release, and Member Logo Policy - see newh.org/member-agreement for details*