Associate Membership Application Membership: February 1, 2025—May 31, 2026 (application valid through April 29, 2025)



Address PRINT Address State County ZippPostal Code County** City City City ZippPostal Code County** City C					all	a Dietetics
Address City State County Tip/Toolal Code County* Tip/Toolal Code Tip/Toolal Co	PLEASE PRINT Academy/CDR ID Number	First Name		Middle Initial	Last Name	
Associate Member A midvidual who does not qualify for Active, Retired. Student or International Academy membership, but meets one of the Competence of Certified Hodinal Education Specialist (CHES) - Physician Assistant (A) - Physician Assistant (A) - Physician Assistant (A) - Registered Environmental Health Specialist (CHES) - Registered Environmental Health Specialist (CHES) - Registered Environmental Health Specialist (CHES) - Registered Environmental Health Specialist (MS) - Sepech-Language Pathologist (CC-SLP) - Physician Assistant (A) - Registered Environmental Health Specialist (MS) - Sepech-Language Pathologist (CC-SLP) - Physician of Sepechatic (MS) - Sepech-Language Pathologist (CC-SLP) - Physician Assistant (A) - Registered Environmental Health Specialist (MS) - Sepech-Language Pathologist (CC-SLP) - Physician Assistant (A) - Registered Environmental Health Specialist (MS) - Sepech-Language Pathologist (CC-SLP) - Physician Assistant (A) - Registered Environmental Health Specialist (MS) - Sepech-Language Pathologist (CC-SLP) - Physician Assistant (A) - Registered Environmental Health Specialist (MS) - Sepech-Language Pathologist (CC-SLP) - Physician Assistant (A) - Registered Environmental Health Specialist (MS) - Sepech-Language Pathologist (CC-SLP) - Physician Assistant (A) - Registered Environmental Health Specialist (MS) - Sepech-Language Pathologist (CC-SLP) - Physician Assistant (A) - Registered Environmental Health Specialist (MS) - Sepech-Language Pathologist (CC-SLP) - Physician Assistant (A) - Registered Environmental Health Specialist (MS) - Sepech-Language Pathologist (CC-SLP) - Physician Assistant (A) - Registered Environmental Health Specialist (MS) - Sepech-Language Pathologist (CC-SLP) - Registered Science - Registered Science - Registered Environmental Health Specialist (MS) - Sepech-Language Pathologist (CC-SLP) - Physician Assistant (A) - Registered Environmental Health Specialist (MS) - Sepech-Language Pathologist (CC-SLP) - Registered Science - Registered Environmental Health Speci				Wildale IIIIIai	_ Last Name	
Primary Phone Cartiso one Name Ruserose Ruserose Name Ruserose R	City	State	County	Zip/Postal Coo	deCountry** _ ne EU must also complete and submi	t a Data Use Consent)
Por you're membership and/or credential security, date of birth and mother's maiden name are required and will be used for identification verification.	Maiden/Former Name(If applicable circle one)		Primary Phone	(circle one: F	lome Business Mobile)	
## Without of Birth Mother's Maiden Name Mother's Maiden Name	Primary E-mail	mails that the Academy an	d its related organizations (state affiliates, dietetic	practice /member interest/Academy g	groups) may elect to se
Who referred you to Join today? Please enter full name and location (city and state): Associate Member An individual who does not qualify for Active, Retired, Student or International Academy membership, but meets one of the following criteria: I hold a valid US license or credential as: Certified Cliniary Professional (CM, CFPP); Certified Edinary Professional (CM, CFPP); Certified Edinary Professional (CM, CFPP); Certified Interpret (PT);		ecurity, date of birth a	nd mother's maiden n	ame are required a	nd will be used for identification	on verification.
Who referred you to Join today? Please enter full name and location (city and state): Associate Member An individual who does not qualify for Active, Retired, Student or International Academy membership, but meets one of the following criteria: I hold a valid US license or credential as: Certified Cliniary Professional (CM, CFPP); Certified Edinary Professional (CM, CFPP); Certified Edinary Professional (CM, CFPP); Certified Interpret (PT);	Date of Birth	M	lother's Maiden Name			
Associate Member An individual who does not qualify for Active, Retired, Student or International Academy membership, but meets one of the following criteria: Dertified Culinary Professional Occupational Therapiet (OT) Occupational Therapiet (OT) Occupational Culinary Professional (CDM, CFPP) Occupational Therapiet (OT) Occupational Comprehensive Certified Food Protection Professional (CDM, CFPP) Physician (MD or DO) Physician (MD or DO) Occupational Comprehensive Food Safety (CCFs) Physician (MD or DO) Physician (MD or DO) Physician (MD or DO) Physician Assistant (PA) Occupational (CDM, CFPP) Physician (MD or DO) Physician Assistant (PA) Occupational (CDM, CFPP) Physician (MD or DO) Physician Assistant (PA) Occupational (CDM, CFPP) Physician (MD or DO) Physician Assistant (PA) Occupational (CDM, CFPP) Physician (MD or DO) Physician Assistant (PA) Occupational (CDM, CFPP) Physician (MD or DO) Physician Assistant (PA) Occupational (CDM, CFPP) Physician (MD or DO) Physician Assistant (PA) Occupational (CDM, CFPP) Physician (MD or DO) Physician Assistant (PA) Occupational (CDM, CFPP) Physician (MD or DO) Physician Assistant (PA) Occupational (CDM, CFPP) Physician (MD or DO) Physician Assistant (PA) Occupational (CDM, CFPP) Physician (CDM, CFPP)	Who referred you to join today?	and state):				
□ Certified Culinary Professional * □ Certified Food Early Manager, Certified Food Protection Professional (CDM, CFPP) * □ Certified In Comprehensive Food Safety (CCFS) * □ Certified Food Comprehensive Food Safety (CCFS) * □ Certified Professional Food Safety (CFF) * □ Certified Professional Food Safety (CFFS) * □ Certified Spots Medicine Practitioner * □ Clinical Psychologist (LCP or CP) * □ Clinical Social Worker (CSW, LSW or LCSW) * □ Dentist (DS or DMD) * □ Profession and Institution and Detection of Certification and related degree required. ### Profession of the Profession on Detection Experiment (CDR) ### \$80.477.1600 ext. Option 2 or certification on or Detection Experiment (CDR) ### \$80.477.1600 ext. Option 2 or certification or Detection Experiment (CDR) ### \$80.477.1600 ext. Option 2 or certification. ### State Affiliate Designation You may select one state affiliate dietetic association. If no selection is made, you will be assigned to the state affiliate of the Academy of Nutrition and Dietetics (IAAND). Indicate preferred state affiliate. By checking this box, I acknowledge that by accepting membership in the Academy, I agree to abide by the Academy (CDR Code of Ethics for the Nutrition and Dietetics in enfortang them. I also consent to receive any faxes or e-mails that the Academy and the related organizations (effiliates). DFG MIGs, and Academy or Group Diversion and Dietetics Profession as amended from time to time, the Academy Bylaws and regulations, and to hold harmless the Academy, Its membership and the Academy Pylaws and regulations and the Academy Pylaws and regulations, and to hold harmless the Academy, Its members and employees for their activities in enfortang them. I also consent to receive any faxes or e-mails that the Academy and the related organizations (effiliates).	Associate Member An individual v					
State Affiliate Designation You may select one state affiliate dietetic association. If no selection is made, you will be assigned to the state affiliate corresponding to address of record. Those with foreign or APO/FPO addresses who do not select an affiliate will be assigned the International Affiliate corresponding to address of record. Those with foreign or APO/FPO addresses who do not select an affiliate will be assigned the International Affiliate of the Academy of Nutrition and Dietetics (IAAND). Indicate preferred state affiliate By checking this box, I acknowledge that by accepting membership in the Academy, I agree to abide by the Academy/CDR Code of Ethics for the Nutrition and Dietetics Profession as amended from time to time, the Academy Bylaws and regulations, and to hold harmless the Academy, its members and employees for their activities in enforcing them. I also consent to receive any faxes or e-mails that the Academy and its related organizations (affiliates, DPGs MIGs, and Academy Groups) may elect to send to me. I certify that the information presented in this application is accurate to the best of my knowledge. The Academy has the right to verify the information presented and I understand that any information on this application that is falsified is in violation of the Academy (CDR Code of Ethics for the Nutrition and Dietetics Profession. I also understand the Academy reserves the right to revoke my membership if I am found to be in violation of the Code of Ethics for the Nutrition and Dietetics Profession. To view the complete Academy (CDR Code of Ethics, visit www.eatrightPRO.org/CDR Code of Ethics, visit www.eatrightPRO.org/Dor. Method of Payment Method of Payment Academy of Nutrition and Dietetics Academy of Nutrition and Dietetics Foundation (ANDF) Contribution: Academy of Nutrition and Dietetics Foundation (ANDF) Contribution: Academy of Nutrition and Dietetics Political Action Committee (ANDPAC) Contribution: Academy of Nutrition and Dietetics Political Action Committee (AND	□ Certified Culinary Professional * □ Certified Dietary Manager, Certified F Protection Professional (CDM, CFPP) □ Certified in Comprehensive Food Safe □ Certified Health Education Specialist □ Certified Midwife (CM or CMN) □ Certified Professional—Food Safety (□ Certified Sports Medicine Practitioner □ Clinical Psychologist (LCP or CP) □ Clinical Social Worker (CSW, LSW or □ Dental Hygienist (BS-DH, RDH or LDI □ Dentist (DDS or DMD)	Occuood	macist (RPh or Pharm ical Therapist (PT) ician (MD or DO) ician Assistant (PA) stered Environmental egistered Sanitarian (I stered Nurse (RN) * iol Nutrition Specialist ech-Language Patholo	Health Specialist/ REHS or RS) (SNS) * gist (CCC-SLP)	OR degree from a US region college/university in: Agriculture Biochemistry Computer Science Family and Consumer Home Economics Hospitality and Tourist Hotel, Restaurant and Management Microbiology Requires submission of o	Science n Institutional
State Affiliate Designation You may select one state affiliate dietetic association. If no selection is made, you will be assigned to the state affiliate corresponding to address of record. Those with foreign or APO/FPO addresses who do not select an affiliate will be assigned the International Affiliate of the Academy of Nutrition and Dietetics (IAAND). Indicate preferred state affiliate By checking this box, I acknowledge that by accepting membership in the Academy, I agree to abide by the Academy/CDR Code of Ethics for the Nutrition and Dietetics Profession as amended from time to time, the Academy Bylaws and regulations, and to hold harmless the Academy, Its members and employees for their activities in enforcing them. I also consent to receive any faxes or e-mails that the Academy and its related organizations (affiliates, DPGs MIGs, and Academy Groups) may elect to send to me. I certify that the information presented in this application is accurate to the best of my knowledge. The Academy has the right to verify the information presented and I understand that any information on this application that is falsified is in violation of the Academy/CDR Code of Ethics for the Nutrition and Dietetics Profession. I also understand the Academy reserves the right to revoke my membership if I am found to be in violation of the Code of Ethics for the Nutrition and Dietetics Profession. To view the complete Academy/CDR Code of Ethics, visit www.eatrightPRO.org/join. Method of Payment	administered by the Commission on Dietet	ic Registration (CDR). If yo	u are/were credentialed as	an RD/RDN or DTR/ND1	'R by CDR and would like to address	ON or DTR/NDTR issues relating
Profession as amended from time to time, the Academy Bylaws and regulations, and to hold harmless the Academy, its members and employees for their activities in enforcing them. I also consent to receive any faxes or e-mails that the Academy and its related organizations (affiliates, DPGs MIGs, and Academy Groups) may elect to send to me. I certify that the information presented in this application is accurate to the best of my knowledge. The Academy has the right to verify the information presented and I understand that any information on this application that is falsified is in violation of the Academy/CDR Code of Ethics for the Nutrition and Dietetics Profession. I also understand the Academy reserves the right to revoke my membership if I am found to be in violation of the Code of Ethics for the Nutrition and Dietetics Profession. To view the complete Academy/CDR Code of Ethics, visit www.eatrightPRO.org. Signature (Required)	State Affiliate Designation Yo affiliate corresponding to address of record	u may select one stat rd. Those with foreign	e affiliate dietetic asso n or APO/FPO addres	ociation. If no selections who do not selections	tion is made, you will be assigned as a affiliate will be assigned	the International
understand that any information on this application that is falsified is in violation of the Ácademy/EDR Code of Ethics for the Nutrition and Dietetics Profession. I also understand the Academy reserves the right to revoke my membership if I am found to be in violation of the Code of Ethics for the Nutrition and Dietetics Profession. To view the complete Academy/CDR Code of Ethics, visit www.eatrightPRO.org. Signature (Required) Date (month/day/year) Processing Fee (non-refundable): \$25.00 Mail completed application and required documentation along with your check to: Academy of Nutrition and Dietetics Attention: Membership Team, 120 South Riverside Plaza, Suite 2190 Chicago, Illinois 60606-6995 Make checks payable to: Academy of Nutrition and Dietetics (Payments accepted in US dollars only.) Academy of Nutrition and Dietetics Pay This Total Amount:	Profession as amended from time to time, the A enforcing them. I also consent to receive any fa	Academy Bylaws and reg	julations, and to hold har	mless the Academy, it	s members and employees for the	eir activities in
Method of Payment For your security, if paying with a credit card or ACH you are encouraged to apply online at www.eatrightPRO.org/join. Mail completed application and required documentation along with your check to: Academy of Nutrition and Dietetics Attention: Membership Team, 120 South Riverside Plaza, Suite 2190 Chicago, Illinois 60606-6995 Make checks payable to: Academy of Nutrition and Dietetics (Payments accepted in US dollars only.) Academy of Nutrition and Dietetics Political Action Committee (ANDPAC) Contribution: Pay This Total Amount:	understand that any information on this applica understand the Academy reserves the right to r	tion that is falsified is in very evoke my membership it	violation of the Academy/ I am found to be in viola	CDR Code of Ethics for	or the Nutrition and Dietetics Profe	ession. I also
For your security, if paying with a credit card or ACH you are encouraged to apply online at www.eatrightPRO.org/join. Mail completed application and required documentation along with your check to: Academy of Nutrition and Dietetics Attention: Membership Team, 120 South Riverside Plaza, Suite 2190 Chicago, Illinois 60606-6995 Make checks payable to: Academy of Nutrition and Dietetics (Payments accepted in US dollars only.) Processing Fee (non-refundable): \$25.00 Total DPG, MIG and Academy Group Dues (from reverse): Academy of Nutrition and Dietetics Foundation (ANDF) Contribution: Academy of Nutrition and Dietetics Political Action Committee (ANDPAC) Contribution: Pay This Total Amount:	Signature (Required)			Date (m	onth/day/year)	
online at www.eatrightPRO.org/join. Mail completed application and required documentation along with your check to: Academy of Nutrition and Dietetics Attention: Membership Team, 120 South Riverside Plaza, Suite 2190 Chicago, Illinois 60606-6995 Make checks payable to: Academy of Nutrition and Dietetics (Payments accepted in US dollars only.) Total DPG, MIG and Academy Group Dues (from reverse): Academy of Nutrition and Dietetics Foundation (ANDF) Contribution: Academy of Nutrition and Dietetics Political Action Committee (ANDPAC) Contribution: Pay This Total Amount:	Method of Payment				Academy Membership Dues:	\$182.00
Mail completed application and required documentation along with your check to: Academy of Nutrition and Dietetics Attention: Membership Team, 120 South Riverside Plaza, Suite 2190 Chicago, Illinois 60606-6995 Make checks payable to: Academy of Nutrition and Dietetics (from reverse): Academy of Nutrition and Dietetics Foundation (ANDF) Contribution: Academy of Nutrition and Dietetics Political Action Committee (ANDPAC) Contribution: Pay This Total Amount:	For your security, if paying with a credit conline at www eatrightPRO org/ioin	ard or ACH you are e	ncouraged to apply	Proc	essing Fee (non-refundable):	\$25.00
120 South Riverside Plaza, Suite 2190 Chicago, Illinois 60606-6995 Academy of Nutrition and Dietetics Political Action Committee (ANDPAC) Contribution: Make checks payable to: Academy of Nutrition and Dietetics (Payments accepted in US dollars only.) Foundation (ANDF) Contribution: Academy of Nutrition and Dietetics Pay This Total Amount:	Mail completed application and required	documentation along			, ,	
Make checks payable to: Academy of Nutrition and Dietetics (Payments accepted in US dollars only.) Academy of Nutrition and Dietetics Political Action Committee (ANDPAC) Contribution: Pay This Total Amount:	120 South Riverside Plaza, Suite 2	2190				
(Payments accepted in US dollars only.) Pay This Total Amount:		trition and Distotics		Action Committee (ANDPAC) Contribution:		
Promotion Code:		and Dietetics	m and Dictolics		Pay This Total Amount:	
					Promotion Code:	

Academy of Nutrition and Dietetics (the Academy) dues must be paid in full based upon your membership category. Membership, DPG, MIG and Academy Group dues and processing fees are non-refundable and non-transferable. Academy dues include an allocation for membership in the state affiliate. Academy dues are not deductible as charitable contributions, but dues may be deductible as ordinary business expenses. It is estimated that 10% of the total dues amount is allocated to lobbying activity and is therefore not deductible.

The Academy of Nutrition and Dietetics is an equal opportunity organization.

Academy of Nutrition and Dietetics Active Membership Application: February 1, 2025—May 31, 2026

DPG, MIG, and Academy Group memberships will begin upon receipt/processing and expire May 31, 2026.

DPG, MIG and Academy Group due	es are not prorated, refundable of	or transferable.		•	
Member Interest Group	os (MIGs) Those who share	e a common interes	st, focused on areas other than the	e practice of dietetics or geographic l	ocation.
□ Asian Americans and Pacific Islanders (AAPI)		#67 (\$20)	□ Indians in Nutrition and Dietetics (IND)		#60 (\$20)
□ Cultures of Gender and Age (COGA)		#61 (\$25)	□ Latinos and Hispanics in	Dietetics and Nutrition (LAHIDAN)	#01 (\$35)
□ Disabilities in Nutrition and Dietetics (Disabilities)		#69 (\$25)	□ National Organization of Nutrition (NOBIDAN)	f Blacks in Dietetics and	#04 (\$40)
□ Global Member Interest Grou	p (GMIG)	#68 (\$30)	□ Religion Member Interes	st Group (RMIG)	#62 (\$20)
			MIG Total (enter	on reverse side of application)
Dietetic Practice Group	ps (DPGs) Professional in	nterest groups that	provide opportunities for leadersh	ip, career development and networki	ng.
□ Behavioral Health Nutrition (B	HN)	#12 (\$40)	□ Nutrition Educators of H	ealth Professionals (NEHP)	#51 (\$35)
□ Cardiovascular Health and We	ell-being (CV-WELL)	#34 (\$40)	□ Nutrition Entrepreneurs (NE)		#30 (\$50)
□ Clinical Nutrition Management	t (CNM)	#44 (\$45)	□ Nutrition Informatics (NI)		#47 (\$35)
□ Diabetes (DDPG)	•	#23 (\$45)	□ Oncology Nutrition (ON)		#20 (\$45)
□ Dietetics in Health Care Comr	munities (DHCC)	#31 (\$45)	□ Pediatric Nutrition (PNPG)		#22 (\$45)
□ Dietitians in Business and Cor	mmunications (DBC)	#32 (\$45)	□ Public Health/Communit	y Nutrition (PHCNPG)	#10 (\$40)
□ Dietitians in Integrative and Fu	unctional Medicine (DIFM)	#18 (\$50)	□ Renal Dietitians (RPG)		#21 (\$40)
□ Dietitians in Medical Nutrition	Therapy (DMNT)	#27 (\$45)	□ Research (RDPG)		#54 (\$45)
□ Dietitians in Nutrition Support	(DNS)	#24 (\$40)	□ School Nutrition Services (SNS)		#42 (\$40)
□ Food and Culinary Profession	als (FCP)	#46 (\$45)	□ Sports and Human Performance Nutrition (SHPN)		#33 (\$45)
□ Healthy Aging (HA)		#11 (\$40)	∪ Vegetarian Nutrition (VN)		#14 (\$40)
□ Hunger and Environmental Nutrition (HEN)		#15 (\$45)	□ Weight Management (WM)		#26 (\$45)
☐ Management in Food and Nutrition Systems (MFNS)		#41 (\$45)	□ Women's Health (WH)		#28 (\$40)
□ Nutrition Education for the Pul	blic (NEP)	#52 (\$40)	DPG Total (enter on reverse side of application)		
A = d = = = = = = = = = = = = = = = = =					
Academy Groups Organiza					
□ Nutrition and Dietetic Educato	ors and Preceptors (NDEP)	#50 (\$50)	Group Total (enter o	on reverse side of application)	
Demographic Information	the Academy uses this inform	ation to tailor progr	ams and services to meet your ne		l,
Gender: ☐ Female ☐ Male	(Individuals from t ☐ Non-binary/third gender		elf –describe	•	
_				ify your race by checking one of the	boxes below.)
Race:	r Alaskan Native	I Asian □	Black or African American	☐ Native Hawaiian or Pacific Island	ler
☐ White Practice area (Select one that is me	ost applicable)	Two or more race	es	☐ Prefer not to identify	
business and industry	□ clinical nutrition	☐ com	nmunications	☐ community and public health nu	trition
consultant	education	☐ entr	repreneurial	a executive leadership	
informatics	management	☐ rese	earcn	☐ other	
Focus area (Select one that is mos ☐ agriculture	st applicable.) □ allergy/immunology	,	☐ bariatrics	☐ cardiovascular	
college and university dining	community nutrition		☐ communications/journalism	=	
☐ diabetes care	digital or mobile he		disordered eating	food and nutrition co	
☐ food safety ☐ global health	☐ gastroenterological☐ integrative and fund		☐ generalist ☐ malnutrition	☐ gerontological nutrit☐ management	ion
☐ marketing	☐ maternal and child		media and public relations	<u> </u>	
☐ nutrition and food policy	☐ nutrition support		□ oncology	☐ pediatric nutrition	
preventive care/wellness	quality managemen	nt	renal nutrition	school nutrition serv	rices
☐ sports nutrition	sustainability		☐ weight management	☐ other	
Work/practice setting (Select one	_ ''		-		
☐ acute-care—inpatient☐ college and university dining	☐ acute-care—outpati☐ college, university o		☐ ambulatory / outpatient car☐ contract food management	_	up home
☐ food or equipment manufacturer,		. adademio	company	hospice or palliative	care
distributor or retailer	health or fitness fac		home health	☐ pharmaceutical or nu	
☐ long-term care	☐ non-governmental o	raanization	☐ office	manufacturer, distrib	utor or rotailor
□ post-acute or rehab facility	private practice	nganization	☐ restaurant	□ retail	utoi oi retailei

☐ trade or professional association

☐ surgery center

Membership Application Membership: February 1, 2025—May 31, 2026



Data Use Consent

If you are a resident of the European Union (EU), including the United Kingdom, please fill out this section. This section ensures that the Academy has your consent for use of, and your personal management of, personal identification information within the General Data Protection Regulation (GDPR) of the EU, as of May 25, 2018.

Academy/CDR ID Number	(If you were not a fo	ormer member and do not have a	n ID Number, leave this blank and a number will be
First Name	Middle Initial	Last Name	
		artners, exhibitors, and ve	endors to enable them to communicate with
you, via email, about relevant programmer of the formula of the fo			
[] I do consent to the use	es of my data described above uses of my data described ab	oove.	
The Academy may also request se information is optional and enables demographics.			der, or disability requirements. Such ed services, or gather data about
Please select one of the t	ollowing options:		
	es of my data described above uses of my data described ab		
The Academy takes precautions to access, disclosure, alteration and c			and misuse, as well as unauthorized ecurity measures.
You can withdraw your consent at a to 7 years.	any time by contacting us at <u>m</u>	nanageconsent@eatright.c	org. Otherwise, we will retain this data for up
For more information, please see o	ur Privacy Notice at: https://w	ww.eatrightpro.org/about-ı	us/our-policies/privacy-policy

Academy of Nutrition and Dietetics— Membership Categories and Qualifications

Active Member Any person who meets one or more of the following criteria:

- Is a registered dietitian (RD); registered dietitian nutritionist (RDN); dietetic technician, registered (DTR); nutrition and dietetics technician, registered (NDTR); or has established eligibility to write the Registration Examination for Dietitians or Dietetic Technicians, administered by the Commission on Dietetic Registration (CDR).
 - No Documents Réquired
- Has completed a baccalaureate degree and dietetics program (Plan IV, Plan V, Didactic, Dietetic Internship, Coordinated, AP4 or Individualized Supervised Practice Pathway (ISPP) programs) that the Accreditation Council for Education in Nutrition and Dietetics (ACEND) has accredited or approved.
 - Verification Statement identifying ACEND Program Completion
- Has completed an associate degree program for dietetic technicians that ACEND has accredited or approved.
 - Original Transcript or Confirming Statement from the Registrar
 - Verification Statement identifying ACEND Program Completion
- Has earned a master's or doctoral degree and holds any one degree (baccalaureate, master's or doctoral) in one of the following areas: dietetics, food and nutrition, nutrition, community/public health nutrition, food science and/or food service systems management or a regionally accredited college or university must confer degrees used to satisfy membership qualifications.
 - Original Transcript or Confirming Statement (of highest degree earned) from the Registrar
 - Original Transcript Confirming Degree in Specified Area (Note: If the highest degree was obtained in one of the above specialty areas, submit that transcript only)
- Is an active member of the Dietitians of Canada (DC).
 - Copy of current Dietitians of Canada membership card

Note: Original transcripts or confirming statements from the registrar must include the degree earned, date the degree was conferred and seal of the college or university. Verification Statement of ACEND Program Completion is provided by the Program Director upon completion of the program.

Privileges of Active Membership Active members whose dues are not in arrears shall be entitled one vote in each matter subject to member vote and are eligible to hold elected and appointed offices and positions at the national level. Active members shall be eligible to hold elected and appointed offices and positions at the affiliate level as designated by the affiliate dietetic association.

Student Member (This category carries an eight-year limit)

Any person who meets one or more of the following criteria:

- Is a student currently enrolled in a ACEND-accredited or approved dietetics program who does not meet requirements for Active membership.
- Is a student enrolled in a regionally accredited, post-secondary education program that ACEND has not accredited or approved. This classification is available to students who state their intent to enter a ACEND-accredited or approved program.
- Is a current Active member returning to school on a full-time basis for a baccalaureate or advanced degree or to complete a ACEND-accredited or approved dietetics program. Annual verification required.
 - Statement of Student Status (student transcript, letter from ACEND
 - Program Director or class schedule) Returning Student Application Form

Privileges of Student Membership Student members whose dues are not in arrears shall have a right to vote in national or affiliate elections and be eligible to hold appointed positions at the national and affiliate levels if a resident of the United States or US Territories. Student members shall not have a right to hold elected positions on the national or affiliate levels. This does not apply to the Academy's Student Advisory Committee, whose members are elected by Academy student members.

Retired Member Any dietetics practitioner qualifying for the Active membership category who is:

- No longer gainfully employed (defined as making equal to, or more than, the current Federal poverty level for an individual) in dietetic practice or education and is at least 62 years of age.
 - Verification of birthdate.
- Retired on total (permanent) disability.
 - Copy of the Social Security Determination of Disability Form or statement from a medical doctor attesting to your disability and its

Privileges of Retired Membership Retired members whose dues are not in arrears shall be entitled to all the rights of the Active membership category

International Member Any person who:

- Has completed formal training in food, nutrition or dietetics received outside the United States and US Territories, verified by the country's professional dietetics association or national regulatory body.
 - International Membership Verification Form
- Is a student enrolled in a food, nutrition or dietetics education program outside the United States and US Territories which is not a US regionally accredited institution and is not accredited by ACEND. classification carries a six-year limit and is available for international students who state their intent to complete formal training in food, nutrition or dietetics outside the US and US Territories as verified by their education program.
 - International Membership Verification Form

Privileges of International Membership International members may be members of committees and attend meetings. International members shall be entitled to vote and eligible to hold elected office at the affiliate level. International Student members may be members of committees and attend meetings, International Student members shall be able to vote at the affiliate level but shall not have a right to hold elected offices at the national and affiliate levels.

Note: In accordance with U.S. sanctions laws, the Academy of Nutrition and Dietetics cannot accept as members persons from the countries embargoed by the United States, including Iran, Syria, Cuba, North Korea and the Crimea region of Ukraine, or who are subject to any U.S. listbased sanctions.

Associate Member Any person who is not eligible for Active, Student, Retired or International category membership and:

Has a valid U.S. license or certification as:

Certified Culinary Professional 3 Certified Dietary Manager, Certified Food Protection Professional (CDM, CFPP) * Certified in Comprehensive Food Safety (CCFS) * Certified Health Education Specialist (CHES) * Certified Midwife (CM or CMN) Certified Professional—Food Safety (CP-FS) *
Certified Sports Medicine Practitioner *
Clinical Psychologist (LCP or CP)
Clinical Social Worker (CSW, LSW or LCSW) Dental Hygienist (BS-DH, RDH or LDH) Dentist (DDS or DMD) Nurse Practitioner (NP) Occupational Therapist (OT) Pharmacist (RPh or PharmD) Physical Therapist (PT) Physician (MD or DO) Physician (MD of BO)
Physician Assistant (PA)
Registered Environmental Health Specialist/
Registered Sanitarian (REHS or RS) Registered Nurse (RN) *

School Nutrition Specialist (SNS) * Speech-Language Pathologist (CCC-SLP)

NOTE: * Requires verification of license or certification in the specified profession and verification of related degree. Other professional designations only require proof of license, training or certification.

- Has a bachelor's, master's or doctoral degree from a U.S. regionally accredited college/university in agriculture, biochemistry, computer science, family and consumer science, home economics, hospitality and tourism, hotel restaurant and institutional management or microbiology
 — Original Transcript Confirming Degree in Specified Area

Note: Original transcripts or confirming statements from the registrar must include the degree earned, date the degree was conferred and seal of the college or university.

Privileges of Associate Membership Associate members whose fees are not in arrears shall have access to applicable Academy benefits, products, and services and be eligible to hold appointed positions at the national affiliate (state), and dietetic practice and member interest group (DPG and MIG) levels.

Associate members shall NOT have the right to: Hold elected positions on Associate minders and NOT investities in the national, affiliate (state), and DPG/MIG levels; vote in national, affiliate (state), and DPG/MIG elections; be listed in Find a Registered Dietitian Nutritionist; post to member blogs; take the Commission on Dietetic Registration's (CDR) Certification Courses; participate in the Academy's professional liability insurance program.

Additional information for completing the application.

Academy Membership Year The Academy's membership year is June 1—May 31. Membership will begin upon receipt/processing and will expire May 31, 2026.

Application Guidelines

- Applications (submitted online, by mail, email or fax) are considered incomplete without submission of the required payment and documentation as identified for each membership category.
- Please type or print all information on the forms using US English characters
- Applications must be signed.
- Please allow 2-3 weeks for application processing.
- Incomplete applications will be held for 30 days to allow for submission of required documents. After 30 days, incomplete applications will be voided and membership dues will be returned/refunded. Application fees are non-refundable.

Academy Identification Number (Same as CDR Registration ID)

If you are a registered dietitian (RD); registered dietitian nutritionist (RDN); dietetic technician, registered (DTR); nutrition and dietetics technician, registered (NDTR); or former member of the Academy, include your ID number in the space provided.

Contact Information Include your complete formal name, address, daytime telephone number and preferred e-mail address in the spaces provided. In the interest of speed and ease, the preferred method of communication with applicants regarding their application is e-mail. Name changes must be submitted in writing along with original or notarized copies of legal documentation (marriage license/certificates, divorce decree, court order). Visit eatrightPRO.org to obtain a name/address change form.

Data Use Consent If you are a resident of the European Union (EU), including the United Kingdom, complete a Data Use Consent and submit along with your application for membership. This section ensures that the Academy has your consent for use of, and your personal management of, personal identification information within the General Data Protection Regulation of the EU.

Supporting Documents may be required and are based upon the membership category and qualifications. Additional information is available on the application and the Categories and Qualifications listing on the reverse side.

- Verification Statement of ACEND Program Completion is provided by the Program Director upon completion of the program.
- Original transcripts or confirming statements (of the highest degree earned) from the registrar must include the degree earned, date the degree was conferred and seal of the college or university. Photocopies are not accepted
- Statement of Student Status can be one of the following: student transcript, letter from ACEND Program Director, or class schedule
- International Member Verification form can be obtained online at www.eatrightPro.org or by calling the Academy Member Service Center 800-877-1600, Option 1 (weekdays 8:00 am—5:00 pm Central Time) (International callers +1-312-899-0040, Option 1) and must be completed by a representative of the applicants national dietetic association or regulatory body. International Students must have the form completed by a representative from their dietetics education program.

State Affiliate Dietetic Association Designation

Academy members may join one state affiliate dietetic association. Please indicate your preferred state dietetic association in the space provided. If no selection is made, you will be assigned one based upon the state dietetic association that corresponds to your address of record. Members with foreign or APO/FPO addresses who do not select an affiliate will be assigned to the International Affiliate of the Academy of Nutrition and Dietetics (IAAND).

Payment Information

ees are payable in US dollars.

Payments may be made via credit card or check (payable to the Academy of Nutrition and Dietetics).

Dues and fees are not refundable or transferable.

- For your security, if paying by credit card you are encouraged to apply online at www.eatrightPRO.org/join.
- Mail completed application, along with documentation and

Academy of Nutrition and Dietetics Attn: Membership Team 120 South Riverside Plaza, Suite 2190 Chicago, Illinois 60606-6995

Dietetic Practice Groups (DPGs), Member Interest Groups (MIGs) and Academy Groups Academy members may join dietetic practice groups (DPG), member interest groups (MIG) or Academy Groups. Fees vary depending on the group (see reverse side of application for the list of groups and their corresponding fees). Check the group(s) you wish to join, enter the fee total on the space provided in the payment section of the application form. Fees are non-refundable and non-transferable.

DPGs, MIGs, and Academy Groups joined using this application will begin upon receipt/processing and will expire May 31, 2026.

ACADEMY OF NUTRITION AND DIETETICS FOUNDATION (ANDF)

is the only charitable organization devoted exclusively to supporting nutrition and dietetics professionals, empowering them to help consumers live healthier lifestyles. As the philanthropic arm of the Academy of Nutrition and Dietetics, the Foundation makes an impact on the profession and Academy members through scholarships, awards, fellowships and food and nutrition research. The Foundation does not receive any portion of Academy member dues and relies solely on donations to thrive. Please support your Foundation with a gift today. For additional information and contribution options visit: www.eatrightFoundation.org.

ACADEMY OF NUTRITION AND DIETETICS POLITICAL ACTION COMMITTEE (ANDPAC) is the only political action committee dedicated to food, nutrition and health issues. ANDPAC contributes to candidates from both parties who support the Academy's public policy priorities. Contributions are voluntary and not tax-deductible.

For additional information and contribution options, including a monthly plan, visit: www.eatrightPRO.org/ANDPAC.

Note: ANDPAC is only able to accept contributions from U.S. citizens.

Academy Code of Ethics The Academy of Nutrition and Dietetics (Academy) and its credentialing agency, the Commission on Dietetic Registration (CDR), believe it is in the best interest of the profession and the public it serves to have a Code of Ethics that provides guidance to practitioners about their professional practice and conduct. Except for sections dealing solely with the credential, the Academy/CDR Code of Ethics for the Nutrition and Dietetics Profession applies to all members. To view the complete Code of Ethics, visit www.eatrightPRO.org.

Optional Demographic Information The Academy is an equal opportunity organization. This information helps the Academy determine new and expanded programs and services. Your response is voluntary and will in no way be used when your application is processed. Individuals from the EU must also complete and submit the Data Use Consent.

Affirmative Action Policy It is the policy of the Academy to promote, financially support, implement, monitor and update affirmative action practices and procedures in all their respects. Using the principles of equal opportunity, nondiscrimination and a comprehensive affirmative action program, the Academy seeks to increase the participation of under-represented groups in the national association, affiliates, professional leadership and staff.

> Have questions about the Academy of Nutrition and Dietetics, membership categories, qualifications or how to complete the application?

Call: Weekdays, 8AM-5PM Central Time 800-877-1600, Option 1 International callers +1-312-899-0040, Option 1 **FAX:** 312-899-4812 e-mail: membership@eatright.org

Apply online at www.eatrightPRO.org/join

For additional information on the Academy membership, visit www.eatrightPRO.org/MembershipInfo