

**\*Use this template to request Non-Profit Affiliate membership.**

Jordan Read  
Executive Director  
CUAHSI  
1167 Massachusetts Ave.  
Arlington, MA 02476

Dear Dr. Read,

The purpose of this letter is to confirm that \_\_\_\_\_ wishes to apply to  
*(name of non-profit affiliate institution)*  
become an Affiliate Member of the Consortium of Universities for the Advancement of  
Hydrologic Science, Inc. (CUAHSI). We have appointed \_\_\_\_\_ as our  
*(title, name of appointed representative)*  
official Representative. Upon notification of acceptance of our application for affiliate  
membership, we will remit the \$500 membership fee.

**Representative**

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Department: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Sincerely,