



AAAR Membership Application

Annual dues for membership are included in the registration fees for the Annual Conference, typically held in the fall of each year. For persons who do not attend the Annual Conference, membership dues shall be paid by December 31. All members will receive a one-year electronic subscription to *AS&T* (including back issues for that year).

PLEASE PRINT OR TYPE (fields will expand as you type – Word form only)

First Name/Given Name: _____ Last Name/Surname: _____
 Company or Organization: _____ Department: _____
 Address 1: _____ Address2: _____
 City: _____ State/Province: _____ Zip/Postal Code: _____
 Country: _____
 Phone: _____ Fax: _____
 E-Mail: _____

Member Classification and Dues - Listed dues are for membership beginning January 1. Full, Early Career, Student, and Retiree membership include free online subscription to AS&T.

Membership Type	Price
Full Member/Early Career Member *	<input type="checkbox"/> \$99
Student Member**	<input type="checkbox"/> \$38
Retired Member***	<input type="checkbox"/> \$38
Organizational Member (Includes two full memberships) Please fill out a separate application for the second full membership and attach to this form. Is the name listed on this application the Organizational Representative? Yes No	<input type="checkbox"/> \$2,094

*Early Career means most recent degree completed within the past five years

**Student applications must be accompanied by an official letter from the university indicating full-time enrollment. Post Docs are not considered students.

***Retired membership requires permission from the Executive Committee.

Printed Journal Subscription:	Price
Full/Early Career Member (receive 3 issues 4x per year)	<input type="checkbox"/> \$40
Student/Retiree Member	<input type="checkbox"/> \$80

TOTAL AMOUNT \$ _____ All payments must be made in U.S. Funds drawn on a U.S. Bank.

If paying by credit card:
 American Express Visa MasterCard

Card Number: _____ Expiration Date: _____
 Cardholder's Name: _____

Cardholder's Signature: _____

Please send completed form with check to:

AAAR
 11130 Sunrise Valley Drive, Suite 350
 Reston, VA 20191
 Phone: 703.437.4377

Or fax with credit card information:

Fax: 703.435.4390