

AMATYC MEMBERSHIP FORM

The American Mathematical Association of Two-Year Colleges

First Name	Middle Initial	Last Name	Position
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College/Company _____

College/Company Address	Phone
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City	State	Zip
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Residence Address	Phone
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City	State	Zip
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Email _____

Indicate preferred mailing address: College/Company Residence

- Check here if you wish your name to be excluded from the AMATYC Directory.
 Check here if you wish your name to be excluded from any non-AMATYC mailing lists.

Is your Institution a (please select one): Two-Year College Four-Year College Other, please specify _____

Regular Membership Categories: These memberships include the *MathAMATYC Educator* and the *AMATYC News*.

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Individual Membership | <input type="checkbox"/> \$95 for one year | <input type="checkbox"/> \$185 for two years | <input type="checkbox"/> \$270 for three years |
| <input type="checkbox"/> Life Membership | <input type="checkbox"/> \$1,900 one payment | <input type="checkbox"/> \$158.33/month over 12 months | <input type="checkbox"/> \$79.17/month over 24 months |
| <input type="checkbox"/> \$10 Yearly Associate Membership (full-time student, non-voting member) | | | |

Name of AMATYC sponsor _____

NOTE: Institutional Membership information available upon request. \$ _____

Special Membership Categories (Full-time mathematics faculty excluded): Special Membership categories include access to the web version of the *MathAMATYC Educator*, but DO NOT include the membership drive information, voting rights, or eligibility for AMATYC office.

- | | | |
|---|--|----------|
| <input type="checkbox"/> \$48 Yearly Retired Membership | <input type="checkbox"/> \$48 Yearly Adjunct Faculty | \$ _____ |
|---|--|----------|

Voluntary Donations to the AMATYC Foundation:

- | | | | |
|--|----------|--|----------|
| <input type="checkbox"/> Developmental Mathematics | \$ _____ | <input type="checkbox"/> Project ACCESS | \$ _____ |
| <input type="checkbox"/> Endowment | \$ _____ | <input type="checkbox"/> Research in Mathematics Education for Two-Year Colleges | \$ _____ |
| <input type="checkbox"/> General Development* | \$ _____ | <input type="checkbox"/> Standards | \$ _____ |
| <input type="checkbox"/> Grants | \$ _____ | <input type="checkbox"/> Student Mathematics League | \$ _____ |
| <input type="checkbox"/> Leila & Simon Peskoff Award | \$ _____ | <input type="checkbox"/> Student Research League | \$ _____ |
| <input type="checkbox"/> Margie Hobbs Award | \$ _____ | <input type="checkbox"/> Wanda Garner Presidential Scholarship | \$ _____ |

All payments in U.S. funds payable to AMATYC Total Amount Enclosed \$ _____

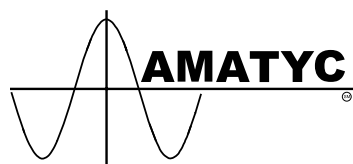
- Check # _____ American Express Visa Mastercard Discover

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Signature _____ Exp. Date _____

How did you learn about AMATYC?

- | | |
|--|---|
| <input type="checkbox"/> Colleague (Name: _____) | <input type="checkbox"/> Supervisor (Name: _____) |
| <input type="checkbox"/> Conference Announcement | <input type="checkbox"/> Affiliate Meeting |
| <input type="checkbox"/> AMATYC News | <input type="checkbox"/> Traveling Workshop |
| <input type="checkbox"/> MathAMATYC Educator | <input type="checkbox"/> Webinar |
| <input type="checkbox"/> Other, please specify _____ | |



AMATYC is a 501(c)(3) charitable corporation.

Return Completed Form with Payment to:
AMATYC Office

5983 Macon Cove, Memphis, TN 38134

Phone: (901) 333-5643 Fax: (901) 333-5651

Email: amatyc@amatyc.org Website: www.amatyc.org

You may also join or renew online at www.amatyc.org.