## AMATYC MEMBERSHIP FORM

The American Mathematical Association of Two-Year Colleges

<table>
<thead>
<tr>
<th>First Name</th>
<th>Middle Initial</th>
<th>Last Name</th>
<th>Position</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>College/Company</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>College/Company Address</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>State</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Residence Address</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>State</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Email</th>
</tr>
</thead>
</table>

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.

☐ Individual Membership ☐ $90 for one year ☐ $175 for two years ☐ $255 for three years

☐ Life Membership ☐ $1,800 one payment ☐ $150/month over 12 months ☐ $75/month over 24 months

☐ $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.

☐ $45 Yearly Retired Membership ☐ $45 Yearly Adjunct Faculty $________________

### Voluntary Donations to the AMATYC Foundation:

☐ Developmental Mathematics $_________ ☐ Project ACCCESS $_________

☐ Endowment $_________ ☐ Research in Mathematics Education for Two-Year Colleges $_________

☐ General Development* $_________ ☐ Standards $_________

☐ Grants $_________ ☐ Student Mathematics League $_________

☐ Leila & Simon Peskoff Award $_________ ☐ Student Research League $_________

☐ Margie Hobbs Award $_________ ☐ Wanda Garner Presidential Scholarship $_________

$________________

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

☐ Check # _____________________ ☐ American Express ☐ Visa ☐ Mastercard ☐ Discover

Credit Card # _____________________

Signature ___________________________ Exp. Date ___________________________

### How did you learn about AMATYC?

☐ Colleague (Name: _____________________) ☐ Supervisor (Name: _____________________)

☐ Conference Announcement ☐ Affiliate Meeting ☐ Traveling Workshop ☐ Webinar

☐ AMATYC News ☐ MathAMATYC Educator ☐ Other, please specify ____________________________

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.

> This form and dues rates expire June 30, 2020. <

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