

MEMBERSHIP APPLICATION – January 1, 2009 to December 31, 2009

**Please mark the desired
type of membership:**

- Regular Membership, \$25 Emeritus Membership, Free
 Institutional Membership, \$75 Lifetime Membership, \$250
 Student Membership, \$15

I would like to receive the newsletter in hard copy: Yes No (For institutional members, please provide contact information for up to five individuals)

Name: _____ Email: _____

Organization: _____

Title/Position: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Fax: _____

Complete this form, enclose a check, and mail to: UAACCE, PO Box 203, Salt Lake City, UT 84110