



AAH Membership Form

Check:

- ☐ New membership ☐ Renewal membership
- ☐ Regular membership (\$15.00 year)
- ☐ Associate membership (\$7.00 year)
- ☐ Institutional membership (\$40.00 year)
- ☐ Life membership [available to retired members over the age of 60] (\$200.00)

Payment enclosed: \$ _____ (limited to five years in advance)

Additional donation: \$ _____.

Is this additional donation designated for:

- ☐ Meeting subvention fund
- ☐ Publications subvention fund
- ☐ Unrestricted

Please check appropriate title: ☐ Prof. ☐ Dr. ☐ Ms. ☐ Mr. ☐ Other (specify) _____

Last Name _____

First name(s) _____

Mailing Address _____

City _____

State or Province _____ Postal Code _____ Country _____

Email address (please print neatly!!) _____

Academic Institution (faculty/staff/student) _____

MAIL TO:

Cheryl Golden, Treasurer
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