



## 2010 MEMBERSHIP DUES

### IMPORTANT: PLEASE READ

1. Dues payment, in U.S. Dollars, includes the AATSP journal *Hispania* and membership to your local chapter.
2. To be eligible for the reduced AATSP rate and to participate in the **2010** National Spanish Exam dues must be received by **January 31, 2010**.
3. To sponsor a chapter of Sociedad Honoraria Hispánica your membership must be in good standing.
4. You are invited to include a tax deductible donation to the AATSP General Fund.

Member ID# \_\_\_\_\_

**PLEASE PRINT**

Name \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
First Middle Last

Maiden Name \_\_\_\_\_ School/Institution Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Country \_\_\_\_\_ Phone \_\_\_\_\_ Country \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_ Please set your work/personal computer filters to allow AATSP.org emails through

Mailing Preference: where you receive mail year-round  Work Address  Home Address

**MEMBER INFORMATION**

What position do you hold:  Student  Faculty  Administration

What language(s) do you teach:  Spanish  Portuguese

What level(s) do you teach - Check all that apply

- Elementary  Middle/Junior High  High School  
 2 Year College  4 Year College/University  Administration  
 Other (Please specify) \_\_\_\_\_

**PAYMENT OPTIONS – purchase orders not accepted**

- **Online** at [www.aatsp.org](http://www.aatsp.org)
- **Checks** payable (in U.S. Dollars) to AATSP - mail with this form to: AATSP; 900 Ladd Road; Walled Lake, MI 48390
- **Credit card** - mail this form to the above address or fax to: 248-960-9570

**Membership Dues and Contributions for 2010 Calendar Year**

- |  |          |           |
|--|----------|-----------|
| 1. <b>NEW FIRST-YEAR MEMBERSHIP</b> (Have never been a member of the association)  | \$45.00  | _____     |
| 2. <b>RENEWAL FOR REGULAR MEMBERSHIP</b>   | \$65.00  | _____     |
| 3. <b>STUDENT MEMBERSHIP</b> (PHOTOCOPY OF DATED STUDENT ID OR TRANSCRIPT REQUIRED)<br>Student Memberships cannot exceed three consecutive years. Online payment is <b>not</b> available.  | \$25.00  | _____     |
| 4. <b>JOINT MEMBERSHIP</b> Two individuals residing at the same residential address; one copy of <i>Hispania</i> will be sent to the household.  | \$100.00 | _____     |
| 5. <b>EMERITUS MEMBERSHIP</b> is available to any retired member who has paid dues for at least thirty consecutive years. Emeritus Members are exempt from annual dues but do <b>not</b> receive <i>Hispania</i> . <i>Hispania</i> is available for an annual fee of \$25.00 for Emeritus Members. | \$25.00  | _____     |
| 6. <b>LIFE MEMBERSHIP</b> is available to any regular member who has paid dues for at least forty consecutive years. Life Members are exempt from annual dues and receive <i>Hispania</i> at no charge.  |          | \$0 _____ |
| 7. <b>DONATION</b> to the AATSP General Fund (optional)  |          | _____     |

Please visit [www.aatsp.org](http://www.aatsp.org) for more information on memberships.

**TOTAL (U.S. Dollars)** \_\_\_\_\_

**Credit Card Payment Information:** (Visa/MasterCard)

Amount \$ \_\_\_\_\_

Credit Card # \_\_\_\_\_ Security Code: \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name as it appears on Credit Card \_\_\_\_\_

Signature \_\_\_\_\_

▪ The AATSP provides mailing lists to conference exhibitors, other organizations and companies that provide services related to the profession. Please check this box if you **DO NOT** want to be included in these mailing lists.

**OFFICE USE ONLY:** Rec. \_\_\_\_\_ Ck. # \_\_\_\_\_ Ck. Amt. \$ \_\_\_\_\_ St. ID \_\_\_\_\_ Proc. Date \_\_\_\_\_ Init. \_\_\_\_\_