2022–2023 Individual Membership Form

JOIN ONLINE at awm-math.org!

Please fill in this information and return it along with your dues to:
AWM Membership, PO Box 40876, Providence, RI 02940

Last Name ___________________________ First Name ___________________________ M.I. ___________________________
Address ________________________________________________________________

City ___________________________ State/Province ___________________________
Zip/Postal Code ___________________________ Country ___________________________

AWM’s membership year is from October 1 to September 30. Please fill in this information and return it along with your dues to: AWM Membership, PO Box 40876, Providence, RI 02940

The AWM Newsletter is published six times a year. If you have questions, contact AWM at awm@awm-math.org, 401.455.4042, or visit our website at: www.awm-math.org.

E-mail: ___________________________ Home Phone: ___________________________ Work Phone: ___________________________

PROFESSIONAL INFORMATION:

Position: ________________________________________________________________

Institution/Company: ____________________________________________________

City: ___________________________ State/Province: ___________________________ Zip/Postal Code: ___________________________ Country: ___________________________

DEGREES EARNED:

<table>
<thead>
<tr>
<th>Degree(s)</th>
<th>Institution(s)</th>
<th>Year(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doctorate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Masters</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bachelors</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

INDIVIDUAL DUES SCHEDULE

Please check the appropriate membership category below. Make check or money order payable to: Association for Women in Mathematics.
NOTE: All checks must be drawn on U.S. banks and be in U.S. funds. AWM membership year is October 1 to September 30.

☐ Regular individual membership (new members only)................................................................. $35
☐ Regular individual membership................................................................................................. $70
☐ Regular membership (3 year membership)................................................................................. $210
☐ Family membership................................................................................................................... $35
☐ please indicate family member who is a regular member of AWM:
☐ Contributing membership (includes designation of a free student membership).......................... $160
☐ Contributing membership (3 year membership).......................................................................... $480
☐ Retired or Part-time employed or KWMS Affiliate or AWM-SIAM Reciprocity (circle one)........ $30
☐ Student or unemployed membership (circle one)......................................................................... $20
☐ Outreach membership............................................................................................................... $10
☐ Contribution to the AWM annual giving campaign ..................................................................... $  
☐ Contribution to the AWM Mary and Alfie Gray Award for Social Justice ....................................... $  
☐ Contribution to the AWM Alice T. Schafer Prize fund ................................................................... $  
☐ Contribution to the AWM Anniversary Endowment fund ............................................................. $  
☐ I do not want my name to appear in annual lists of contributors to AWM’s funds.

Please note that all student, unemployed, outreach, family, and KWMS affiliate members and members with non-US addresses receive only the electronic version of the newsletter.

If you wish to receive a print version, please check here ☐

☐ Gift membership from: ___________________________ TOTAL ENCLOSED $ ___________________________