2024–2025 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

ASSOCIATION FOR WOMEN IN MATHEMATICS

PO Box 40876
Providence, RI 02940
401.455.4042
http://awm-math.org
awm@awm-math.org

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: **https://awm-math.org.**

E-mail: _____ Home Phone: _____ WorkPhone: _____

PROFESSIONAL INFORMATION:

Position: _____

If student, check one:

☐ Graduate ☐ Undergraduate

If not employed, leave position and institution blank.

Institution/Company: _____

Country: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

DEGREES EARNED:

	Degree(s)	Institution(s)	Year(s)
Doctorate:			
Masters:			
Bachelors:			

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.

☐ Regular individual membership *(new members only)* $35
☐ Regular individual membership *(members earning <$90,000)* $70
☐ Regular individual membership *(members earning ≥$90,000)* $100
☐ Family membership, *please indicate family member who is a regular AWM member:* _____ $40
☐ Contributing membership (*members earning <$90,000*)(*includes designation of a free student membership*) $160
☐ Contributing membership (*3 year membership, members earning <$90,000*) $480
☐ Contributing membership (*members earning ≥$90,000*)(*includes designation of a free student membership*) $190
☐ Contributing membership (*3 year membership, members earning ≥$90,000*) $570
☐ Part-time employed $35
☐ AWM-SIAM Reciprocity membership $35
☐ AWM-KWMS Affiliate membership $30
☐ Retired membership $40
☐ Student membership $25
☐ Unemployed membership $20
☐ Gift membership, *please indicate name and email of giftee:* _____ $70
☐ Outreach membership $10
☐ Contribution to the AWM Endowment fund ..... $_____
☐ Contribution to the AWM Annual Giving Campaign ..... $_____
☐ 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, gift membership, 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 ☐

TOTAL ENCLOSED $_____