



COLLEGE/UNIVERSITY MEMBERSHIP INVOICE

American Association of University Women
P.O. Box 96793 - Washington, DC 20090-6793
P: 800/326-2289 F: 202/861-8068

AAUW Federal Identification Number: 53-0025390. Dues payments to the Association are not deductible as charitable contributions for Federal Income Tax purposes, but may be used as an ordinary and necessary business expense.

AMOUNT DUE: \$

Dues are based on a sliding scale of student enrollment.

COLLEGE/UNIVERSITY MEMBER

PLEASE CHECK	STUDENT ENROLLMENT	AMOUNT DUE
	1,000 OR UNDER	\$125
	1,001 – 5,000	\$175
	5,001 – 10,000	\$250
	10,001 – 20,000	\$275
	20,001 – 30,000	\$325
	OVER 30,000	\$350

INSTITUTION IS A NEW C/U MEMBER

Name of President/Chancellor: _____

Authorized Signature, if different:
Email: _____

Print Name/Title: _____

COLLEGE UNIVERSITY REPRESENTATIVE

Please designate a committed faculty member or student affairs administrator to receive AAUW publications and mailings, participate on listserv, and share update with your campus.

Representative: _____

Department: _____

Name/Title: _____

Address: _____

City/State/Zip: _____

Phone: _____

Fax: _____

Email: _____

EDUCATION - Membership is open to anyone with an associate's or equivalent, bachelor's or higher degree from a regionally accredited institution.			
INSTITUTION	STATE	DEGREE	DATE EARNED

Occasionally, AAUW's membership list is made available to carefully screened companies/organizations. Check here if you do not want your name on the list.

PAYMENT INFORMATION

Please make payment to: AAUW, P.O. Box 96793 - Washington, DC 20090-6793

Check Charge to: Visa Master Card

Account Number: _____ Expire Date: _____

Card Holders Name and Address: _____

Signature: _____

THE AAUW MEMBERSHIP YEAR EXTENDS FROM JULY 1 THROUGH JUNE 30. PLEASE ALLOW FOUR TO SIX WEEKS FOR PROCESSING YOUR DUES PAYMENT.

OUR INSTITUTION WAS RECRUITED FOR C/U MEMBERSHIP BY _____ OF THE _____ BRANCH OF AAUW.

Thank you for your continued Support!

PLEASE RETAIN A COPY FOR YOUR RECORDS