



ARKANSAS ACADEMY OF SCIENCE

<http://www.ArkansasAcademyofScience.org>

Membership Application (Renewal)

You are invited to participate in the activities and vision of the Arkansas Academy of Science through your annual membership.

INDIVIDUAL MEMBERSHIP

YEAR(S) _____ (membership from April to April marked by annual meeting of the Academy)

Check One: _____ New Member _____ Membership Renewal

Check One: _____ Student (\$15) _____ Regular (\$30) _____ Sustaining (\$35)
 _____ Sponsoring (\$45) _____ Life* (\$500), 4 yearly installments of \$125

Contribution Opportunities to the Arkansas Academy of Science:

Contributor	_____	(\$ any)
Donor	_____	(\$ 100)
Advocate	_____	(\$ 200)
Builder	_____	(\$ 300)
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Visionary	_____	(\$ 1,000)

NAME/TITLE: _____

AFFILIATION: _____

ADDRESS: _____

PHONE(S)/FAX _____

E-MAIL/WEB _____

INTEREST(S)/EXPERTISE:

_____ Botany _____ Zoology _____ Aquatic _____ Environmental _____ Medical
_____ Physics _____ Chemistry _____ Astronomy _____ Geology _____ Engineering
_____ Computer Science _____ Science Education

Thank you for your continued support of the Arkansas Academy of Science.

Please make checks payable to the ARKANSAS ACADEMY OF SCIENCE and MAIL TO:

**Dr. Mostafa Hemmati, Treasurer
Arkansas Academy of Science
P.O. Box 1950
Russellville, AR 72811**