MEMBERSHIP INFORMATION AND APPLICATION INSTRUCTIONS

Applicants may apply for one of four grades of membership, depending on their qualifications: Student Member, Associate Member, Corresponding Electronic Associate Member or full Member. To apply for Student Membership, fill out Parts I and II of the application; to apply for Associate, Corresponding Electronic Associate, or full Membership, or to transfer to these grades, fill out Parts I and III.

BENEFITS OF MEMBERSHIP	full Member	Associate	ce-Associate	Student
JASA Online-Vol. 1 (1929) to present	*	*	*	*
JASA tables of contents e-mail alerts	*	*	*	*
JASA, printed	*	*		
JASA Express Letters-online	*	*	*	*
Acoustics Today-the quarterly magazine	*	*	*	*
Proceedings of Meetings on Acoustics	*	*	*	*
Noise Control and Sound, It's Uses and Control- online archival magazines	*	*	*	*
Acoustics Research Letters Online (ARLO)– online archive	*	*	*	*
Programs for Meetings	Online	Online	Online	Online
Meeting Calls for Papers	Online	Online	Online	Online
Reduced Meeting Registration Fees	*	*		*
Society Membership Directory	Online	Online	Online	Online
Electronic Announcements	*	*	*	*
Physics Today	*	*	*	*
Eligibility to vote and hold office in ASA	*			
Eligibility to be elected Fellow	*	*		
Participation in ASA Committees	*	*	*	*

QUALIFICATIONS FOR EACH GRADE OF MEMBERSHIP AND ANNUAL DUES

Student: Any student interested in acoustics who is enrolled in an accredited college or university for half time or more (at least eight semester hours). Dues: \$50 per year.

Associate: Any individual interested in acoustics. Dues: \$150 per year. After five years, the dues of an Associate increase to that of a full Member.

Corresponding Electronic Associate: Any individual residing in a developing country who wishes to have access to ASA's online publications only including *The Journal of the Acoustical Society of America* and Meeting Programs [see http://acousticalsociety.org/membership_membership_and_benefits]. Dues \$50 per year.

Member: Any person active in acoustics, who has an academic degree in acoustics or in a closely related field or who has had the equivalent of an academic degree in scientific or professional experience in acoustics, shall be eligible for election to Membership in the Society. A nonmember applying for full Membership will automatically be made an interim Associate Member, and must submit \$150 with the application for the first year's dues. Election to full Membership may require six months or more for processing; dues as a full Member will be billed for subsequent years.

JOURNAL OPTIONS AND COSTS FOR FULL MEMBERS AND ASSOCIATE MEMBERS ONLY

- ONLINE JOURNAL. All members will receive access to the *The Journal of the Acoustical Society of America (JASA)* at no charge in addition to dues.
- PRINT JOURNAL. Twelve monthly issues of *The Journal of the Acoustical Society of America*. Cost: \$35 in addition to dues.
- EFFECTIVE DATE OF MEMBERSHIP. If your application for membership and dues payment are received by 15 September, your membership and Journal subscription will begin during the current year and you will receive all back issues for the year. If you select the print journal option. If your application is received after 15 September, however, your dues payment will be applied to the following year and your Journal subscription will begin the following year.

OVERSEAS AIR DELIVERY OF JOURNALS

Members outside North, South, and Central America can choose to have print journals sent by air freight at a cost of \$216 in addition to dues. JASA on CD-ROM is sent by air mail at no charge in addition to dues.

ACOUSTICAL SOCIETY OF AMERICA

1305 Walt Whitman Road, Suite 110, Melville, NY 11747-4300, asa@acousticalsociety.org

APPLICATION FOR MEMBERSHIP

For Office Use Only
Dues Rovd _____
Aprvd by Ed _____
Aprvd by EC _____

Applicants may apply for one of four grades of membership, depending on their qualifications: Student Member, Associate Member, Corresponding Electronic Associate Member or full Member. To apply for Student Membership, fill out Parts I and II of this form; to apply for Associate, Corresponding Electronic Associate, or full Membership, or to transfer to these grades, fill out Parts I and III.

PART I. TO BE COMPLETED BY ALL APPLICANTS (Please print or type all entries)

CHECK ONE BOX	□ NON-MEMBER APPLYING FOR:	STUDENT MEMBERSHIP	Note that your choice of
IN EACH COLUMN	☐ MEMBER REQUESTING TRANSFER TO:	ASSOCIATE MEMBERSHIP	journal option may in-
ON THE RIGHT		CORRESPONDING ELECTRONIC	crease or decrease the
		ASSOCIATE MEMBERSHIP	amount you must remit.
		FULL MEMBERSHIP	

SELECT JOURNAL OPTION:

Student members will automatically receive access to The Journal of the Acoustical Society of America online at no charge in addition to dues. Remit \$50.

Corresponding Electronic Associate Members will automatically receive access to The Journal of the Acoustical Society of America and Meeting Programs online at no charge in addition to dues. Remit \$50.

Applicants for **Associate or full Membership** must select <u>one</u> Journal option from those listed below. Note that your selection of journal option determines the amount you must remit.

[] Online access only - \$150[] Online access plus print Journal - \$185

Applications received after 15 September: Membership and Journal subscriptions begin the following year.

OPTIONAL AIR DELIVERY: Applicants from outside North, South, and Central America may choose air freight delivery of print journals for an additional charge of \$185. If you wish to receive journals by air, remit the additional amount owed with your dues.

LAST NAME	FIRST NAM	3	MIDDLE INITIAL		MS/MR/MRS/DR/PROF
HOME ADDRESS	(STREET & NUMBER)				
CITY	STATE OR PROVI	NCE	ZIP OR H	POSTAL CO	DDE COUNTRY
NAME OF ORGANIZ	ATION OR BUSINESS				
DEPARTMENT					
ORGANIZATION ADDRESS (STREET & NUMBER)					
CITY	STATE OR PROVID	NCE	ZIP OR I	POSTAL CO	DDE COUNTRY
BUSINESS TELEPHO	NE: AREA CODE/NUMBER	FAX: AREA COD	E/NUMBER		HOME TELEPHONE: AREA CODE/NUMBER
E-MAIL ADDRESS: ()	PRINT CLEARLY)	MOBILE PHONE:	AREA CODE/NUMBER		
DATE AND PLACE C	F BIRTII (Req'd for Awards and Emeri	tus Status)	SEX: ∟ Female	∐ Male	
HIGHEST ACADEMIC	DEGREE DA	TE OF DEGREE	FIELD		INSTITUTION GRANTING DEGREE
OTHER DEGREE	МО	NTH/YEAR	FIELD		INSTITUTION GRANTING DEGREE
CHECK PERFERRED ADDRESS FOR MAIL:					

Part I Continued →

PART I CONTINUED: ACOUSTICAL AREAS OF INTEREST TO APPLICANT. Indicate your three main areas of interest below, using 1 for your main interest, 2 for your second, and 3 for your third interest. (DO NOT USE CHECK MARKS.)

- \Box ACOUSTICAL OCEANOGRAPHY **M**
- $\Box\,$ ANIMAL BIOACOUSTICS ${\sf L}\,$
- $\hfill \square$ ARCHITECTURAL ACOUSTICS ${\mbox{\bf A}}$
- BIOMEDICAL ACOUSTICS K
- $\hfill\square$ Computational acoustics ${\bf 0}$
- □ ENGINEERING ACOUSTICS **B**
- ☐ MUSICAL ACOUSTICS C
 ☐ NOISE & NOISE CONTROL D
- $\square PHYSICAL ACOUSTICS E$
- PHISICAL ACOUSTICS
 PSYCHOLOGICAL &
- PHYSIOLOGICAL ACOUSTICS F
- SIGNAL PROCESSING IN ACOUSTICS N
 SPEECH COMMUNICATION H
 STRUCTURAL ACOUSTICS & VIBRATION G
- UNDERWATER ACOUSTICS J

PART II: APPLICATION FOR STUDENT MEMBERSHIP

NAME AND ADDRESS OF COL	LEGE OR UNIVERSITY WHERE PRESENTLY EM	NROLLED	
DEGREE EXPECTED	MONTH & YEAR DEGREE EXPECTED	NUMBER OF SEMESTER HOURS ATTENDED THIS SEMESTER	
PRINT NAMES & E-MAIL ADDRESSES OF TWO FACULTY MEMBERS CERTIFYING THAT YOU ARE REGISTERED FOR AT LEAST ONE-HALF OF FULL TIME			
SIGNATURES OF THE TWO FACULTY MEMBERS LISTED ABOVE CERTIFYING THAT YOU ARE REGISTERED AT LEAST HALF TIME			
SIGNATURE OF APPLICANT		DATE	

PART III: APPLICATION FOR ASSOCIATE MEMBERSHIP, CORRESPONDING ELECTRONIC ASSOCIATE MEMBERSHIP OR FULL MEMBERSHIP (and interim Associate Membership)

SUMMARIZE YOUR MAJOR PROFESSIONAL EXPERIENCE on the lines below: list employers, duties and position titles, and dates, beginning with your present position. Attach additional sheets if more space is required.

CONTRIBUTIONS TO ACOUSTICS: LIST MAIN PUBLICATIONS	, PATENTS, ETC.	Attach separate sheets	if required.
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SPONSORS AND REFERENCES: An application for full Membership requires the names, and email addresses of two references who must be **full Members or Fellows** of the Acoustical Society. Names and signatures are NOT required for Associate Membership, Corresponding Electronic Associate Membership or Student Membership applications.

PRINT NAME OF REFERENCE (required for Full Member applications only)	PRINT NAME OF SECOND REFERENCE (required for Full Member applications only)
EMAIL ADDRESS OF REFERENCE	EMAIL ADDRESS OF SECOND REFERENCE
SIGNATURE OF APPLICANT	DATE

MAIL THIS COMPLETED APPLICATION, WITH APPROPRIATE PAYMENT TO: ACOUSTICAL SOCIETY OF AMERICA, 1305 WALT WHITMAN ROAD, SUITE 110, MELVILLE, NY 11747-4300; FAX: 631-923-2875

METHOD OF PAYMENT

Check or money order enclosed for \$ (U.S. funds/drawn on U.S. bank)				
American Express VISA MasterCard	Signature			
		(Credit card orders must be signed)		
Account Number		Expiration Date	Security Code	
		Mo. Yr.		
Cardholder Name and Billing Address				
Name:				
Street:	City/State	Zip Code	:	

Due to security risks and Payment Card Industry (PCI) data security standards e-mail is NOT an acceptable way to transmit credit card information. Please return this form by Fax (631-923-2875) or by postal mail.