

Become an AAC&U Associate for only \$60

Contact Information

PREFIX (Dr., Mr., Ms., etc.) FIRST NAME MIDDLE NAME OR INITIAL

LAST NAME

TITLE

ACADEMIC DISCIPLINE OR ADMINISTRATIVE OFFICE

INSTITUTION/ORGANIZATION

CAMPUS ADDRESS (INCLUDING BUILDING OR BOX #)

STREET ADDRESS

CITY

STATE ZIP

TELEPHONE

FAX

E-MAIL

Method of Payment

WEB

- I have enclosed a check
- Charge my order to:
- Visa
 - MasterCard
 - American Express

CARD NUMBER EXPIRATION DATE

NAME ON CARD

SIGNATURE

Total Amount of Payment _____

Contact and Mailing Information

- For more information about the Associates program contact Esther Merves at merves@aacu.org or 202.884.7455.
- Mail or fax this form to:
AAC&U
Associate Enrollment
1818 R Street, NW
Washington, DC 20009
Fax: 202.265.9532

AAC&U Associates are entitled to receive all AAC&U quarterlies published during the calendar year in which one joins. Enrollments received after September 1 are extended through the following year.

AAC&U Federal Tax Identification Number: 52-1945674

Available to individuals at AAC&U member campuses only.

To Find Out If Your Campus Is a Member Visit AAC&U's Member List at Our Web Site:
www.aacu.org/membership