

ASCA

Arkansas State Communication Association

<http://www.uamont.edu/organizations/asca/>

Application For Membership or Address change/correction

New Member* Student Member Regular Member* Institutional Membership**
 Address Change/correction

(Each individual member who is part
Of an institutional membership must
Fill out an application. Thank you.)

Date: _____

NAME: _____

ORGANIZATION: _____ POSITION: _____

Please list the address you want all ASCA info mailed to: (note: we must make summer mailouts, please consider this in your decision to determine the best place for you to get ASCA mail)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

Is this your _____ home address or _____ work address?

Home Telephone: _____ Work Telephone: _____

HomeEmail: _____

WorkEmail: _____

I have been a member since: _____

Committee Memberships and Offices held (include dates): _____

Other address: _____

CITY: _____ STATE: _____ ZIP: _____

Is this your _____ home address or _____ work address?

FAX NUMBER: _____

Would you like to become involved in any particular aspect of the ASCA? Any need that we can help with now?

INDIVIDUAL MEMBERSHIP FEE IS \$25.00* PER YEAR
Institutional Memberships are \$100.00 for 4 or less members, \$120.00 for 5 or more members** per year.
A new membership year begins with the Fall Meeting Mailout.

MAKE CHECK PAYABLE TO: ASCA MAIL APPLICATION AND CHECK TO:
John Gale, ASCA Executive Secretary
Wingo 213 201 Donaghey Ave
Conway, AR 72035
501-450-3220
E-mail: jgale@uca.edu

Office Use only: Payment Information: Amount pd by Check _____ Chk# _____ Receipt number _____ amount pd by Cash _____