

AMERICAN SOCIETY FOR PUBLIC ADMINISTRATION

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Membership Application Form

ARTURO GUAJARDO, JR. _____
First name Middle initial Last name

HIDALGO COUNTY CLERK _____
Agency

100 N. CLOSNER _____
Address

EDINBURG TX 78539-3523 _____ **USA** _____
City State Zip+4 Country

1213 S. LINCOLN ST. _____
Home Mailing Address Please send my ASPA Membership benefits to my home address

SAN JUAN, TX 78589 _____ **USA** _____
City State Zip+4 Country

956-318-2149 _____ **956-318-2105** _____
Work Phone Home Phone Fax

AGUAJARDO@HIDALGOCOUNTYCLERK.US _____
e-mail address home e-mail office e-mail

Name of additional family member (if using ASPA's family membership) _____ I have read and agree with ASPA's Code of Ethics. (see www.aspanet.org)

Membership Fee

<input checked="" type="checkbox"/> ASPA Membership \$100.00 <i>Includes 3rd Class mailing of PAR and PA TIMES and access to archives of both online.</i>	<input type="checkbox"/> Family Membership \$35.00 <i>For persons receiving mail at the same residence. One copy of PAR and PA TIMES will be provided to the family. Fee applies to each additional family member. Please indicate name(s) of additional family member(s) on the front of this form under additional fees.</i>
<input type="checkbox"/> New Professional Membership \$75.00 <i>If you graduated less than two years ago, you can receive full ASPA benefits, at this reduced rate, for a maximum of two years. Includes 3rd Class mailing of PAR and PA TIMES and access to archives of both online.</i>	<input type="checkbox"/> Full Student Membership \$75.00 <i>Receive 3rd Class mailing of PAR and PA TIMES and access to archives of both online. Members may use the category of Student Membership for a maximum of three years.</i>
<input type="checkbox"/> International Mail \$100.00 <i>Those living outside of the U.S., Canada, Mexico and not receiving mail at an APO or FPO address.</i>	<input type="checkbox"/> Electronic Student Membership \$40.00 <i>Access PAR current issues and archives online only, receive PA TIMES in mail. Members may use the category of Student Membership for a maximum of three years.</i>
<input type="checkbox"/> International Electronic \$30.00 <i>Those living outside of the U.S., Canada, Mexico and not receiving mail at an APO or FPO address.</i>	

If applying as a student, indicate academic institution and who referred you: _____

Select A Chapter

Chapter Number 137

ASPA members receive **free** membership in one local chapter. Chapters are listed on the back of this form.

Check here if you prefer to be an at-large member.

Exclude my name from any listing of members sold commercially.

More

Get information on:

- Membership Benefits
- Agency/Organization Membership
- Group Membership

at www.aspanet.org

Optional Fees

Section Fees Section membership is in addition to ASPA membership fees. Sections and fees are listed on the back of this form. Section(s) Code(s) _____ Total Section Fees \$ _____	Additional Chapter Fees Members receive membership in one Chapter at no charge. Additional Chapters incur a \$6 fee and are listed on the back of this form. Additional Chapter(s) _____ Total Chapter Fees \$ _____
Postage Options <input type="checkbox"/> Postage for Canada and Mexico (\$25) <input type="checkbox"/> 1st Class PA TIMES delivery (\$15) <input type="checkbox"/> International Air delivery (\$70)	Total Optional Fees _____

Payment Information

Dues must be prepaid. Send completed application form and payment to:
ASPA, c/o SunTrust Bank, Department 41, Washington, DC 20042-0041.

Please add the total membership fee and optional fees to arrive at a grand total fee.

Grand Total Fee \$ _____

Check made payable to ASPA MasterCard VISA American Express

Card Number _____ Expiration Date _____

Signature _____

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