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Check one:

New

Renewal (**unchgd** contact info)

Renewal (**new** contact info)

Payment methods (check one):

Mail with check. Please make check to ASRAS:

ASRAS
Attn: Membership Chair
PO Box 20292
Rochester, NY 14602

Pay by PayPal (include \$2 fee) to asraspaypal@gmail.com

<i>Enter First Name</i>	<i>Enter Last Name</i>	<i>Enter Phone</i>
<i>Enter Street Address</i>		<i>Enter Email</i>
<i>Enter 2nd Email (Family/Support/Patron only)</i>		
<i>Enter City</i>	<i>Enter ST</i>	<i>Enter Zipcode</i>

If renewing, check “new contact info” box to left if phone, email, etc. have changed since last renewal. Otherwise, check “unchgd contact info” box.

Payment methods: Pay by mail with check OR you can pay by PayPal (must include additional \$2 PayPal fee). See instructions in box to left. If paying by PayPal, this form can be mailed separately or emailed to asraspaypal@gmail.com.

You must join the Rochester Academy of Science PLUS individual Sections including ASRAS. Check the amount you are paying for RAS (shaded column) plus amount(s) for any Section(s) you would like to join. Check PayPal fee if paying by PayPal.

Membership Categories <i>(Note: must pay for both RAS and section(s))</i>	Rochester Academy of Science REQUIRED	Anthropology Section	Astronomy Section	Life Sciences Section	Fossil Section	Mineral Section	<u>Subtotal(s)</u>
Member (individual age ≥18)	<input type="checkbox"/> \$10	<input type="checkbox"/> \$2	<input type="checkbox"/> \$25	<input type="checkbox"/> \$2	<input type="checkbox"/> \$10	<input type="checkbox"/> \$5	\$
Family (includes students age <18)	<input type="checkbox"/> \$15	<input type="checkbox"/> \$3	<input type="checkbox"/> \$30	<input type="checkbox"/> \$3	<input type="checkbox"/> \$10	<input type="checkbox"/> \$6	\$
Student (age ≥18 thru full-time college undergraduate)	<input type="checkbox"/> \$5	<input type="checkbox"/> \$1	<input type="checkbox"/> \$5	<input type="checkbox"/> \$1	<input type="checkbox"/> \$5	<input type="checkbox"/> \$2	\$
Supporting (individual or family)	<input type="checkbox"/> \$20	*****	<input type="checkbox"/> \$40	<input type="checkbox"/> \$10	<input type="checkbox"/> \$20	<input type="checkbox"/> \$10	\$
Patron (individual or family)	<input type="checkbox"/> \$30	*****	<input type="checkbox"/> \$50	<input type="checkbox"/> \$20	<input type="checkbox"/> \$30	<input type="checkbox"/> \$20	\$
Life (individual only)	<input type="checkbox"/> \$200	*****	<input type="checkbox"/> \$300	<input type="checkbox"/> \$40	*****	*****	\$
PayPal fee (if paying by PayPal)	*****	*****	<input type="checkbox"/> \$2	*****	*****	*****	\$
Farash Key Payment (\$25 for initial; \$20 for renewal. NOTE: <u>must be a member for 3 years and be recommended to qualify for a key.</u>)	*****	*****	<input type="checkbox"/> \$20 or <input type="checkbox"/> \$25	*****	*****	*****	\$
Astronomical League Membership (optional \$8/year for annual renewal as an ASRAS member)	*****	*****	<input type="checkbox"/> \$9	*****	*****	*****	\$
Gift (Thank you!) Fill in amount	\$	\$	\$	\$	\$	\$	\$
TOTAL payment (remember to include \$2 PayPal fee if paying by PayPal.)	*****	*****	*****	*****	*****	*****	<u>Total Paid</u> \$
Check if you are interested in becoming a Volunteer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	*****

If you are a new member, please tell us how you heard about ASRAS (check all that apply): ASRAS meeting or event, ASRAS website, friend, article (where? _____), interest email list, other (please explain: _____).