



Membership Application

Company			
Name		Title	
Street Address			
City		State/Prov	
Country		ZIP/Postal Code	
Phone		Fax	
E-Mail Address		Website	

Membership Categories: Indicate for which category you are applying

Organizational Memberships

- Corporate Membership Annual dues are \$950 for the first year and \$850 thereafter
 Sustaining Membership Annual dues are \$350

Individual Memberships

- Associate Membership Annual dues are \$100 for the first year and \$75 thereafter
 Subscribing Membership Annual dues are \$100 for the first year and \$45 thereafter

Payment Information

Method of payment: Check/draft in US funds Visa MasterCard American Express

Card # _____ Expiration date _____

Name on card _____

Billing address for card _____

I authorize SPRAT to charge my credit card for the annual dues of the membership category for which I am applying.

Signature		Date	
------------------	--	-------------	--