



Linguistic Society of America

2017-2018 INDIVIDUAL MEMBERSHIP FORM

Please provide all information and please print. Form valid through 9/30/2018.

NAME: \_\_\_\_\_

TITLE \_\_\_\_\_

SHIPPING ADDRESS FOR LANGUAGE: \_\_\_\_\_

\_\_\_\_\_

COUNTRY: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

<b>MEMBERSHIP DUES:</b>		
	Regular: <i>Language</i> online only	\$105.00
	Regular: <i>Language</i> in hard copy	\$115.00
	Student: <i>Language</i> online only	\$45.00
	Student: <i>Language</i> in hard copy	\$55.00
	Emeritus (proof of status required): <i>Language</i> online only	\$75.00
	Emeritus (proof of status required): <i>Language</i> in hard copy	\$85.00
	Life (payable in one, four or twelve installments)	\$1900.00
<b>PLEASE CONSIDER A TAX-DEDUCTIBLE DONATION TO LSA:</b>		<b>INSERT AMOUNT</b>
	Yuki Kuroda Student Fellowship Fund	
	Emmon Bach Fellowship Fund	
	News Stories Initiative	
	Charles Fillmore Student Fellowship Fund	
	Ken Hale Student Fellowship Fund	
	Financial Assistance and Student Support Fund	
	Open Access Publications Fund	
	Program Development and Committee Activities Fund	
	LSA General Fund	
	Leadership Circle (Minimum Annual Contribution \$100)	
<b>PLEASE SEND ME MORE INFORMATION ABOUT PLANNED GIVING TO THE LSA</b>		

TOTAL PAYMENT AMOUNT (Membership & Donation, if applicable): \_\_\_\_\_

Check/Money Order     VISA     MasterCard     AMEX

CARD NUMBER: \_\_\_\_\_ EXP DATE \_\_\_\_\_ SECURITY CODE \_\_\_\_\_

NAME AS IT APPEARS ON THE CARD: \_\_\_\_\_

CREDIT CARD BILLING ADDRESS \_\_\_\_\_

Check here if you would like your membership to renew automatically

**PLEASE SEND COPY OF FORM WITH PAYMENT AND REMIT TO:**

**If a credit card payment, you may fax this form to: 202-835-1717**

**If paying with a check, please send form and check to:**

**Linguistic Society of America**

522 21st St. NW, Suite 120, Washington, DC 20006-5012

202-835-1714; fax: 202-835-1717; email: [lsa@lsadc.org](mailto:lsa@lsadc.org)

**FEIN#: 74-6043371**