

(703) 739-2240 Ext. 107

Aerospace Medical Association 320 South Henry Street Fax (703) 739-9652 Alexandria, VA 22314-3579

www.asma.org

APPLICATION FOR CORPORATE MEMBERSHIP

I hereby apply for Corporate Membership in the Aerospace Medical Association. Please select the preferred Tier from the following list:

Standard \$450

Bronze \$800

□ Silver \$1,200 □ Gold \$1,750

Platinum \$2,500

Save completed/signed form and e-mail as attachment to <u>Membership@asma.org</u> or Fax to (703) 739-9652.

| Benefits | Standard | Bronze | Silver | Gold | Platinum |
|--|----------|---------------|---------------|---------------|---------------|
| Corporate Membership | Yes | Yes | Yes | Yes | Yes |
| Corporate Forum Participation | Yes | Yes | Yes | Yes | Yes |
| Corporate Forum Luncheon | \$50.00 | 1 Free Ticket | 1 Free Ticket | 1 Free Ticket | 1 Free Ticket |
| AsMA Journal (online only*) | \$100.00 | Free | Free | Free | Free |
| Advertising Discount | 5% | 10% | 15% | 20% | 25% |
| Registration Discount | None | 10% | 15% | 25% | 50% |
| Exhibit Discount | 5% | 10% | 15% | 25% | 50% |
| Event Sponsorship (amount applied each year to sponsoring an event at the AsMA Annual Scientific Meeting) | None | \$300.00 | \$550.00 | \$1,000.00 | \$1,500.00 |
| Free Individual Membership(s) | None | None | 1 | 2 | 3 |

*The journal subscription is for online only. A print subscription is available for \$100.

Bronze, Silver, Gold, and Platinum Corporate Members may direct their sponsorship amount to one of the following annual events. Please select ONE (1) event to sponsor. (NOTE: each event may have several sponsors)

AsMA Annual Scientific Meeting Welcome Reception (Sunday evening of the meeting week)

AsMA Richard "Dick" Trumbo 5K Preventive Medicine Walk/Run (Monday morning of the meeting week)

AsMA Fellows Dinner (Monday evening of the meeting week)

AsMA Associate Fellows Breakfast (Wednesday morning of the meeting week)

AsMA Honors Night (Thursday evening of the meeting week)

Our corporate interest/experience in the aerospace medicine field is primarily in the following area(s) (check all that apply):

| Aeromedical equipment | | Civilian aeromedical transportation | | Life sciences research |
|---|-----------|-------------------------------------|--|------------------------|
| Aerospace engineering/manufacturing | | Environmental health | | Nursing services |
| Aerospace medicine | | Health care services | | Occupational medicine |
| Aerospace physiology | | Human factors engineering | | Pharmaceuticals |
| Air Transportation | Insurance | | | Other (please specify) |
| Organization Name (as it should be listed): | | | | |
| Organization Address: | | | | |
| Company Website URL: | | | | |
| Primary Representative:(Last Name) | | | | |
| | | | | |
| Title: | | E-mail Address: | | |
| Telephone Number: | | FAX Number: | | |
| Alternate Representative:(Last Name) | | (First Name) | | |
| | | | | (M.I.) |
| Title: | | | | |
| Telephone Number: | | FAX Number: | | |
| Billing Contact:(Last Name) | | (First Name) | | (M.I.) |
| Title: | | · · · · · · | | () |
| Telephone Number: | | | | |
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| Source of knowledge about the Aerospace M | ledic | al Association: | | |
| | | | | |
| Company Description: | | | | |
| Company Description. | | | | |
| | | | | |
| | | | | |
| | | | | |
| Special Interests: | | | | |
| | | | | |

| Please state the reason you | want to become a Co | orporate Member of AsMA: |
|-----------------------------|---------------------|--------------------------|
|-----------------------------|---------------------|--------------------------|

| METHOD OF PAY | MENT: | CHECK | | | |
|---------------|-------|--------------|-----------|------------|--------|
| CREDIT CARD: | UVISA | ☐ MASTERCARD | □ AMEX | □ DISCOVER | |
| CARD NUMBER: | | | EXP DATE: | | _ CVV: |
| NAME ON CARD: | | | AMOUNT: | | |
| SIGNATURE: | | | | | |

For United States Federal Income Tax purposes, you can deduct as a charitable contribution the price of the membership renewal less the estimated cost of your *Aerospace Medicine and Human Performance* journal subscription. We estimate the cost to produce the journal to be \$100 per year. Any membership contribution in excess of \$100 per year is tax deductible.

For Non-U.S. members, the entire membership fee is related to the activities of the Aerospace Medical Association to improve the professional knowledge and practice of its members. This includes subscription to the Association's professional journal, itself part of the education effort of the Association.