

AEROSPACE MEDICINE AND HUMAN PERFORMANCE

320 S. HENRY STREET, ALEXANDRIA, VA 22314-3579

PHONE (703) 739-2240 FAX (703) 739-9652

Manuscript Number _____ Total # Pages _____ Year _____ Volume _____ Issue _____

First /Corresponding Author _____ Email _____

MS Title _____

Excess Figures, Tables, Color, and Auxiliary Materials:

We encourage the submission of color figures as they greatly enhance the readability and quality of the journal.

Although there is no routine page charge for articles in the printed journal, charges will be levied for excess figures or tables in print and preparation of auxiliary material for the electronic edition. Auxiliary material may include large tables (1 page or longer), figures, questionnaires, or other items that contribute to the paper but are not well suited to the print edition or are of interest to only a small subset of readers. The Editor will evaluate each manuscript in these respects.

	Online	Print	Quantity	Subtotal
B/W Figures, 5 or more per fig.	\$50.00	incl.	_____	_____
Color Figures, each	\$60.00	incl.	_____	_____
Tables, 5 or more	\$50.00	incl.	_____	_____
Tables in excess of one printed page	\$60.00	incl.	_____	_____
Auxiliary Material (per page)	\$60.00	na	_____	_____
				TOTAL _____

Open Access (optional) Fee:

For a fee of \$1500.00, the author may choose to have his/her article available online, for all scientists and students around the world to view free-of-charge from the first day of publication,

___ Yes, I want my paper published as Open Access.

I agree to pay the charges when invoiced (Signature): _____

Print name: _____

Open Access charges will be invoiced using eBill from The Sheridan Press. The invoice will be sent when the manuscript is accepted for publication. Payment should be made as soon as possible. The signature on this form acts as a contract to pay these charges when invoiced.

PDF files and copies of Print Issue:

The price schedule represents the prices for PDF files.

This does **not** extend to the right to post on the Internet.

You may purchase a high-resolution PDF file of your article from which you may print unlimited copies. This may be used as the version of record for depositing in institutional repositories. Please keep in mind that in over 90 years of existence we have never had page charges and that publishing in our journal is currently free to authors. We incur great expense in peer-reviewing and publishing, both online and in print, but do not pass these expenses on to our authors. You may not realize that to maintain the highest quality of scientific research publishing, we need to maintain a high-quality peer-review process and journal production.

Copies of the print issue may be purchased for **\$30, plus \$7.50 U.S. and \$25 international shipping and handling charges, if ordered prior to printing.**

PDF Files	
# of pages	
1–2	\$200
3–4	\$400
5–8	\$600
9–12	\$800
13–16	\$1000

AEROSPACE MEDICINE AND HUMAN PERFORMANCE

2022

320 S. HENRY STREET, ALEXANDRIA, VA 22314-3579

PHONE (703) 739-2240 FAX (703) 739-9652

Volume # _____ Issue# _____ MS# _____

First Author _____

Excess Figures, Tables, Color, and Auxiliary Materials Total from Page 1: _____

PDF file: _____

Print Copy of Journal: _____

Shipping and Handling: _____

Bank fee (\$35) for electronic fund transfers and
checks not drawn on U.S. Bank: _____

Grand Total: _____

Shipping Address

Name _____

Dept. _____

Street _____

City _____

State/ZIP/Post Code _____

Country _____

Phone _____

Billing Address (if different from Shipping Address)

PO Number _____

Name _____

Dept. _____

Street _____

City _____

State/ZIP/Post Code _____

Country _____

Phone _____

Credit Card Payment Details

___ Visa ___ Mastercard ___ Discover ___ AmEx

Name on Card _____

Card Number _____

Expiration Date _____ CVV _____

Signature _____

**Open Access Fee will
be billed separately.**

Please send your order form and purchase order or
prepayment made payable to:

Aerospace Medical Association
Attn: Journal Department
320 S. Henry Street
Alexandria, VA 22314-3579

Order form may also be faxed to 703-739-9652.
Questions should be directed to Stella Sanchez
at 703-739-2240 x 102 or ssanchez@asma.org.

Enclosed: Personal Check _____ Institutional Purchase Order _____ Credit Card Payment Details _____
Electronic fund transfers and checks drawn on non-U.S. banks will be charged a \$35 processing fee.

Signature _____ Date _____