



**UPGRADE YOUR 2021 URISA INDIVIDUAL MEMBERSHIP TO AN
EDUCATIONAL INSTITUTION MEMBERSHIP**

Name of College/University _____
Address _____
City _____ State/Province _____ Zip/Postal Code _____
Country _____
Main Phone _____ Main Fax _____
Agency Website URL _____

Educational Institution Dues Payment:

Educational Institution Membership Fee (includes two faculty members and up to ten students)	Additional Student Members @ \$10
<input type="checkbox"/> \$400	_____ @ \$10 = \$ _____

Specify all individual members on following pages.

Total Due \$ _____ Date _____

Method of Payment (in US dollars) Check enclosed (\$30 fee for all returned checks)

VISA MasterCard American Express

I authorize URISA to charge my credit card account # _____

Expiration Date _____

Signature _____

Return completed form with payment to:

URISA
PO Box 1247
Bedford Park, IL 60499-1247 USA

(847) 824-6300 info@urisa.org www.urisa.org

Include names and complete contact information for both faculty members and ten student members included in membership along with additional students.

Faculty Member #1: Primary Contact for Educational Institution Membership *(main contact for membership administration; will receive annual dues invoice)*

Name _____

Job Title _____

Phone _____ Fax _____

By providing your email address, you will receive periodic emails from URISA (primary communication method for association news, publications).

E-mail _____

Address if different from above _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____

Faculty Member #2:

Name _____

Job Title _____

Phone _____ Fax _____

By providing your email address, you will receive periodic emails from URISA (primary communication method for association news, publications).

E-mail _____

Address if different from above _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____

Student Member #1:

Phone _____

By providing your email address, you will receive periodic emails from URISA (primary communication method for association news, publications).

E-mail _____

Address if different from above _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____

Student Member #2:

Phone _____

By providing your email address, you will receive periodic emails from URISA (primary communication method for association news, publications).

E-mail _____

Address if different from above _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____

Student Member #3: _____

Phone _____

By providing your email address, you will receive periodic emails from URISA (primary communication method for association news, publications).

E-mail _____

Address if different from above _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____

Student Member #4: _____

Phone _____

By providing your email address, you will receive periodic emails from URISA (primary communication method for association news, publications).

E-mail _____

Address if different from above _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____

Student Member #5: _____

Phone _____

By providing your email address, you will receive periodic emails from URISA (primary communication method for association news, publications).

E-mail _____

Address if different from above _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____

Student Member #6: _____

Phone _____

By providing your email address, you will receive periodic emails from URISA (primary communication method for association news, publications).

E-mail _____

Address if different from above _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____

Student Member #7: _____

Phone _____

By providing your email address, you will receive periodic emails from URISA (primary communication method for association news, publications).

E-mail _____

Address if different from above _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____

Student Member #8: _____

Phone _____

By providing your email address, you will receive periodic emails from URISA (primary communication method for association news, publications).

E-mail _____

Address if different from above _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____

Student Member #9: _____

Phone _____

By providing your email address, you will receive periodic emails from URISA (primary communication method for association news, publications).

E-mail _____

Address if different from above _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____

Student Member #10: _____

Phone _____

By providing your email address, you will receive periodic emails from URISA (primary communication method for association news, publications).

E-mail _____

Address if different from above _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____

Additional Student Members @ \$10 each (normally \$20)

Additional Student Member #1: _____

Phone _____

By providing your email address, you will receive periodic emails from URISA (primary communication method for association news, publications).

E-mail _____

Address if different from above _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____

Additional Student Member #2: _____

Phone _____

By providing your email address, you will receive periodic emails from URISA (primary communication method for association news, publications).

E-mail _____

Address if different from above _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____

Additional Student Member #3: _____

Phone _____

By providing your email address, you will receive periodic emails from URISA (primary communication method for association news, publications).

E-mail _____

Address if different from above _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____

Additional Student Member #4: _____

Phone _____

By providing your email address, you will receive periodic emails from URISA (primary communication method for association news, publications).

E-mail _____

Address if different from above _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____

Additional Student Member #5: _____

Phone _____

By providing your email address, you will receive periodic emails from URISA (primary communication method for association news, publications).

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Address if different from above _____

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Country _____

Make additional copies as necessary.