

JOIN URISA TODAY! – INDIVIDUAL MEMBERSHIP APPLICATION

Government Agency, Educational Institution and Corporate/Business Partner memberships are also available and are detailed separately.

Individual membership benefits include: discounted pricing on URISA-sponsored conferences, workshops, webinars and publications; subscriptions to The GIS Professional and URISA Digest; access to the vast electronic URISA Library of conference proceedings, and other resources; along with advocacy efforts for the profession and ample opportunities to contribute.

Annual Membership Fees for Individuals:

- **Professional Membership: \$195**
- **Young Professional Membership: \$125** (for members 35 years of age or younger, limited to no more than five consecutive years of URISA membership.)
- **Student Membership: \$20** (requires proof of full-time student status)

Dues are pro-rated and should be paid according to the following schedule for first year's dues (check category of membership according to your application submittal date). All fees are in US dollars. Annual memberships expire at the end of each calendar year.

Submittal Date	Payment Due
January 1 - March 31	75% of current annual dues fee: <input type="checkbox"/> Professional: \$146.25 <input type="checkbox"/> Young Professional: \$93.75 <input type="checkbox"/> Student: \$15
April 1 - June 30	50% of current annual dues fee: <input type="checkbox"/> Professional: \$97.50 <input type="checkbox"/> Young Professional: \$62.50 <input type="checkbox"/> Student: \$10
July 1 - September 30	25% for remainder of current year, plus 100% dues for following year: <input type="checkbox"/> Professional: \$243.75 <input type="checkbox"/> Young Professional: \$156.25 <input type="checkbox"/> Student: \$25
October 1 - December 31	Free for remainder of current year, 100% of dues pre-paid for future year: <input type="checkbox"/> Professional: \$195 <input type="checkbox"/> Young Professional: \$125 <input type="checkbox"/> Student: \$20

Name _____

Job Title _____

Organization _____

Address (Home or Office) _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____




Phone _____ Fax _____

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

E-mail _____

Is your membership dues supported (paid for or reimbursed by) your employer? Yes No

Please enter social information where appropriate:

 Facebook: _____  Twitter: _____  LinkedIn: _____

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

VISA MasterCard American Express

Amount \$ _____ Date _____

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
 phone: (847) 824-6300, fax: (847) 824-6363 info@urisa.org www.urisa.org

