



# AMERICAN FOREIGN SERVICE ASSOCIATION 2024 ASSOCIATE MEMBERSHIP APPLICATION

## Demographic Information

Name		Nickname	
<input type="text"/>		<input type="text"/>	
Street Address		City, State, Zip	
<input type="text"/>		<input type="text"/>	
Personal Email		Home Phone	Ethnicity (Optional)
<input type="text"/>		<input type="text"/>	<input type="text"/>
Date of Birth	Gender	Name of Spouse/Partner	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

### *The Foreign Service Journal*

Check here to receive the print version in addition to the digital copy, 10x per year. (If not checked, delivery will be digital only.)

## Credit Card or Check Information

Name (as it appears on card)		Credit Card Number	
<input type="text"/>		<input type="text"/>	
Credit Card Type	Expiration Date	Amount Due	
<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard	<input type="text"/>	<input type="text"/>	
Signature	Check	Check Number	
<input type="text"/>	<input type="checkbox"/> See Attached Check	<input type="text"/>	

### Auto-Renewal

If paying annually by credit card, would you like your membership to automatically renew?  Yes  No

## Dues Rates

CATEGORY	
<input type="checkbox"/> Associate	\$143.77