

American Society of Agricultural and Biological Engineers

UNDERGRADUATE STUDENT MEMBERSHIP APPLICATION

APPLICANT INFORMATION		
Mr. Ms. Other: (Please circle) F	First Name:	ast/Family Name:
Date of Birth:	Male Female (Please circle)	Cell Phone:
Permanent Home Address:		
City:	State/Province:	ZIP/Postal Code:
Country:	New Member Reinstating (Please circle)	Permanent Email:
UNIVERSITY INFORMATION		
University/College:		
School Home Address:		
City:	State/Province:	ZIP/Postal Code:
Country:		
Anticipated Graduation Date:	Degree Pursued:	
MAIL PREFERENCE		
I prefer to receive mailings from ASABE at: Permanent Home School Home (Please circle)		
I prefer to receive hard copy of <i>Resource</i> magazine: No Yes (<i>Please circle</i>)		
TECHNICAL INTEREST AREAS		
Please select one primary and one secondary technical interest area: Primary: Secondary:		
ASE - Applied Science & Engineering AQ – Aquaculture EOPD – Education, Outreach & Professional Development ES – Energy Systems ESH – Ergonomics, Safety, & Health FE – Forest Engineering ITSC – Information Technologies, Sensors & Control Systems MS – Machinery Systems NRES – Natural Resources & Environmental Systems PAFS – Plant, Animal, & Facility Systems PRS – Processing Systems		
DUES & PAYMENT		
Dues Amount: \$25.00 Funds are in US dollars. Please make checks payable to ASABE.		
I will pay by: Check Credit Card (Plea		
Name on Card:	Card Number:	
Exp Date: Security Code	: Signature:	
Please return application and payment to:		
ASABE Membership Department 2950 Niles Road St. Joseph, MI 49085-9659 USA Questions? 800/371-2723, 269/429-0300; 269/429-3852 Fax; memb@asabe.org; www.asabe.org		