



P.O. Box 1139 • Tallahassee, FL 32302
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2010 AFFILIATE MEMBERSHIP STUDENT MEMBERSHIP APPLICATION

To be included in the 2010-2011
TSAE Directory, applications
must have been received by
February 1, 2010.

Student Membership: For an individual who is a full-time student (as defined by the student's educational institution) in an undergraduate or graduate program in any area of study. Student members shall have no voting authority and cannot hold elected office.

Membership is valid through 2010 and is prorated depending on when you join.

****TSAE IS AN INDIVIDUAL MEMBERSHIP SOCIETY WITH MEMBERSHIP BEING HELD BY THE INDIVIDUAL RATHER THAN THE ORGANIZATION.** Membership is fully portable in the event of a change in employment. Transfer of membership to another individual is done only with the express written permission of the original holder of the membership.

Information:

Name: _____ Preferred/Nickname: _____

Age Range (for demographic information only): check one ___17-24 ___25-34 ___35-44 ___45-54 ___55-64 ___65+

Phone: _____ Fax*: _____

E-mail*: _____

Educational Institution: _____

Your Address: _____

City, State, Zip: _____

Major Area of Study: _____

Graduation/Degree Completion Date: _____

I am interested in receiving meeting notices for the following Roundtables (informal job/topic specific discussions that meet during lunch).

- Communications/Membership Finance and Administration Fundraising
- Government Affairs Meeting Planners Technology

I may be interested in serving on the following Committees: (Please mark all that apply)

- Awards Community Involvement Education Day and Trade Show
- Marketing Nominations Publications & PR

Membership Dues: Please check appropriate join date and fee:

- Joining Between January 1, 2010—June 31, 2010: \$35 (membership paid through 2010)
- Joining between July 1, 2010—September 30, 2010: \$17.50 (membership paid through 2010)
- Joining Between October 1, 2010—December 31, 2010: \$35 (membership paid through 2011)

Membership Amount Due: \$ _____ **Check Enclosed** Charge to: Visa MC AMEX

Acct. No. _____ Exp. Date _____

CVV (required) _____ (the 3 digit code on the back of Visa/MC, or 4-digit code on AMEX above account number)

Cardholder's Name _____ Signature _____

Billing Address _____ Date _____

**TSAE dues are not deductible as a charitable contribution for federal tax purposes but may be deductible as a business expense. Less than 1% of dues paid are allocable to lobbying activities. Membership is for one calendar year. CAPITAL EXECUTIVE subscription of one year is included in membership dues. *By providing/confirming your fax number and e-mail address, you hereby authorize TSAE to communicate with you via e-mail and/or facsimile.*