

CAS Membership Form

After choosing the membership category, write a check for the amount of dues. For qualifying membership categories, you may add to the dues amount the cost of one or both magazines at the club discount price.

Make check payable to: Chicago Astronomical Society and send your remittance to:
P.O. Box 30287, Chicago, IL. 60630-0287.

If more than one person is joining please an additional form.

Name: _____

Select Membership Category:

- Regular \$30.00 Student \$17.00 Associate \$13.75
 Patron \$250.00 Benefactor \$1000.00
 Affiliating \$18.00/\$20.00 Corresponding \$18.00/\$20.00

Select Magazine (s)

- Sky & Telescope \$32.95 Astronomy Magazine \$34.00

Enter Total: _____ **U.S.D.**

Address: _____

City: _____ **State:** _____ **Zip:** _____

Home Phone: _____ **Work Phone:** _____

E-Mail: _____

Occupation: _____

The information contained on this form will go into the CAS Directory which is available to *members only*. We do not sell our membership list.