

California Conference of the American Association of University Professors 2007 Membership Application

To join the AAUP, please complete this form and mail it to AAUP, West Coast, 15 Shattuck Sq., Suite 200, Berkeley, CA 94704-1151. If you have any questions, call us at (800) 431-3348.

Name _____
(Please print) Last First Middle

Institution _____

Academic Field _____

Tenured? Yes No Tenure track? Yes No

Home Address _____

City State Zip Code

Work Address _____

City State Zip Code

Daytime Tel. _____ Other Tel. _____

E-Mail _____

We are required to use home addresses for AAUP election materials. Please tell us where you prefer to receive all other

AAUP mail: Home Work

Please do not include my name on non-AAUP mailing lists

2007 AAUP Dues*

<u>Full Time</u>	\$167
<u>Associate</u>	\$126
<u>Entrant/Retired</u>	\$84
<u>Joint</u>	\$84
<u>Part Time/Graduate Student</u>	\$42

Membership Categories

(Please check one):

Active Faculty Membership

- Full Time: teacher, researcher or similar academic professional at an accredited college or university
- Entrant: non-tenured and new to the AAUP or new to a full-time appointment (discounted rate valid for up to four years)
- Part Time: paid on a per-course or percentage basis
- Joint: with spouse/partner a full-time member
- Graduate student: enrolled at an accredited institution (discounted rate valid for up to five years)

Associate Membership

- A non-voting membership for all other supporters, including administrators and the public

Payment

My check payable to the AAUP is enclosed for \$ _____

Please charge \$ _____ to
 VISA MasterCard
 American Express Discover

Card No.: _____

Expiration Date: _____

Signature: _____

*Rates are valid through December 31, 2007. Members may pay dues annually by check, or may submit this application with a bank debit form to authorize monthly deductions, deductions will be adjusted at the beginning of each calendar year to reflect any changes to annual dues rates.