



2011 DUES PAYMENT

Name: _____

Job title: _____

Organization: _____

Organization Address: _____

Address2: _____

City State/Province Zip Country

Phone: _____ Fax: _____

E-mail: _____ Web site: _____

PAYMENT SCHEDULE

(Please select one.)

	Dues	Multimember discount**
Annual	<input type="checkbox"/> \$295	<input type="checkbox"/> \$250
Semi Annual	<input type="checkbox"/> \$147.50	<input type="checkbox"/> \$125
Quarterly	<input type="checkbox"/> \$73.75	<input type="checkbox"/> \$62.50

**If you are taking the discount for additional members from the same organization, please list the primary member:

PAYMENT METHOD

Amount (fill in from payment schedule above): _____

Enclose a check, or charge the above amount to VISA, MasterCard or American Express by completing the information below.



Card type/number Expiration date

Cardholder e-mail Cardholder phone

Cardholder name printed Cardholder signature

TAXPAYER INFORMATION

We estimate that 10 percent of your annual ASNE dues will support lobbying activities and is, therefore, nondeductible.

TaxpayerID: 54-0649704

QUESTIONS? Contact Jeanne Esmond, 703-453-1121, jesmond@asne.org.

Please make a copy for your records and return this form along with your payment to:
ASNE, 11690B Sunrise Valley Dr., Reston VA 20191
Phone: 703-453-1122 Fax: 703-453-1133 E-mail: asne@asne.org