



# NATIONAL ASSOCIATION OF MATHEMATICIANS MEMBERSHIP AND DONATION FORM

(FOR NEW APPLICATIONS, ANNUAL MEMBERSHIP RENEWAL AND DONATIONS.)

\*\*\*\*\*MEMBERSHIP CALENDAR YEAR JANUARY 1 - DECEMBER 31 2007\*\*\*\*\*

TITLE \_\_\_\_\_ NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

INSTITUTION/EMPLOYER \_\_\_\_\_

TELEPHONE: HOME (\_\_\_\_) \_\_\_\_\_ OFFICE (\_\_\_\_) \_\_\_\_\_

FAX: (\_\_\_\_) \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

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### SELECT APPROPRIATE MEMBERSHIP TYPE

[ ] STUDENT:\$30      [ ] INDIVIDUAL:\$50      [ ] LIFE:\$500      [ ] INSTITUTIONAL:\$150

REGULAR DONATION \$ \_\_\_\_\_

DONATION TO THE PERPETUAL FUND \$ \_\_\_\_\_

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### PLEASE RETURN COMPLETED FORM AND MEMBERSHIP DUES TO:

Dr. Roselyn E. Williams, Secretary-Treasurer  
National Association of Mathematicians  
P.O. Box 5766  
Tallahassee, Florida 32314-5766  
(850)412-5236 (office)  
email: Roselyn.Williams@fam.u.edu  
Web page: (new) <http://www.nam-math.org>

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### INDIVIDUALS AND STUDENTS:

Please complete below if you did not send NAM this information within the past three years. List all degrees you currently hold. Circle the correct degree.

B.S. or B.A.: Area \_\_\_\_\_ Institution \_\_\_\_\_

M.S. or M.A.: Area \_\_\_\_\_ Institution \_\_\_\_\_

Ph.D. or Ed.D: Area \_\_\_\_\_ Institution \_\_\_\_\_

Other: Area \_\_\_\_\_

### DESIRED PARTICIPATION IN NAM:

- [ ] Institutional Representative (for NAM)
- [ ] Area or State Representative \_\_\_\_\_
- [ ] Committee Member (specify interest): Interest \_\_\_\_\_
- [ ] Need additional information about the organizational structure of NAM

### ETHNICITY:

[ ] African American      [ ] Hispanic American      [ ] White      [ ] Other