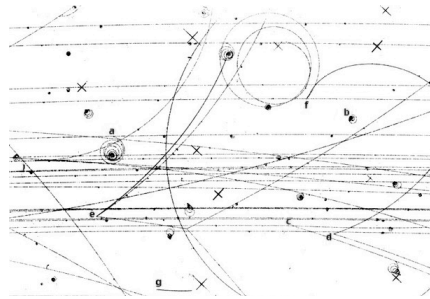




Advanced Laboratory Physics Association



Salutation: (Prof., Dr., Lord, Lady, *etc.*): _____

First Name: _____

Last Name: _____

School Affiliation: _____

Department: _____

School Address: _____

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Current Memberships: APS, division(s): _____

AAPT

Other, please specify: _____

Please check *each* appropriate box:

I want to become a member of ALPhA, and will contribute \$30.00 to the organization.

I wish to renew my membership in ALPhA with a contribution of \$30.00.

I wish to make a voluntary contribution to ALPhA of _____.

I would be willing to help with some initiatives to support advanced lab instruction, serve on a task force and/or ad hoc committee. – Please feel free to specify: _____

What activities/support/etc. would you like to see this association provide? Please be as general or specific as you would like:

All contributions will be acknowledged with a receipt sent by email.

If you have any questions, comments or concerns, feel free to contact Paul Dolan at 773-442-5785 or p-dolan@neu.edu. Please return this form and contribution (if selected above) to: Steve Wonnell, JHU Physics/Astronomy Dept., 3400 N. Charles Street, Baltimore, MD 21218.