

# American Oriental Society

HATCHER GRADUATE LIBRARY, UNIVERSITY OF MICHIGAN  
ANN ARBOR, MICHIGAN 48109-1190

## 2019 DUES PAYMENT AND 2019 ANNUAL MEETING PRE-REGISTRATION

PRINTED NAME: \_\_\_\_\_

POSTAL ADDRESS: street, city, state, postal code [\*zip+four required for USA\*], country: \_\_\_\_\_

CURRENT E-MAIL ADDRESS: \_\_\_\_\_

INSTITUTIONAL AFFILIATION: \_\_\_\_\_

**Note:** You may pay 2019 dues and meeting registration either by using this form or by paying online at:  
<https://www.americanorientalsociety.org/shop/>.

### 2019 MEMBERSHIP DUES

For **2019** I choose the following category of membership in the Society:  
(Membership Year January–December)

Member category I (<\$45,000/year income):	\$45.00/year* ( )
Member category II (\$45,000–\$75,000/year income):	\$65.00/year* ( )
Member category III (\$75,000–\$100,00/ year income):	\$95.00/year ( )
Member category IV (>\$100,000/ year income):	\$125.00/year ( )
Life membership: (= 20x category IV membership):	\$2,500.00 ( )
Retired members (includes print JAOS, unless declined):	\$50.00/year ( )
Student Member:	\$25/ year* ( )
Joint Membership Premium for Family Partner	\$20.00/year ( )
International Postal Surcharge for Members Residing outside the US (for print Journal only):	\$5.00/year ( )
Print subscription to JAOS Premium:	\$20.00/year ( )

\* Includes only electronic access to JAOS.  
Print access may be purchased for an additional \$20/year

I wish to contribute to the Society's Endowment Fund: \$ \_\_\_\_\_

I wish to contribute to the Graduate Student Award Fund: \$ \_\_\_\_\_

**Total Dues Amount:** \$ \_\_\_\_\_

**Total Dues and Contribution Amount:** \$ \_\_\_\_\_

(PLEASE TURN OVER)

2019 ANNUAL MEETING PRE-REGISTRATION

Pre-Registration Fees (Registration for Full Meeting only—Includes Banquet AND Abstracts)

- Regular (Includes Banquet) \$175.00 ( )
• Student (Includes Banquet) \$75.00 ( )
• Banquet (Extra Ticket or for Guests) \$75.00 ( )
• Reserve a Copy of the Abstracts to be Sent by Post \$25.00 ( )

(Check Reserve a Copy of Abstracts ONLY if you wish to receive a copy in the mail and will NOT attend the Meeting)

Please check your banquet preference:

- Beef banquet option. . . . . • Kosher banquet option. . . . .
• Fish banquet option. . . . . • Vegetarian banquet option. . . . .

Total Payment for Pre-Registration: \$\_\_\_\_\_

GRAND Total Payment: \$\_\_\_\_\_

— DEADLINES —

Send your dues remittance before December 31, 2018. There is a \$10 surcharge on all dues paid after January 2016, except for new members paying after the deadline.

If you intend to submit an abstract of your proposed paper for inclusion on the Program, you must return this form with the completed Announcement form, your Abstract, Pre-Registration fee, and 2019 Dues by October 15, 2018. If you are registering for the meeting but not submitting a paper, the deadline for pre-registration is March 1, 2018.

Please send checks or money orders payable to the order of the American Oriental Society. Members residing outside the U.S. should submit payment by check in U.S. DOLLARS ONLY DRAWN ON A U.S. BANK OR BY INTERNATIONAL MONEY ORDER. Any other means of payment will be returned, and payment will not be credited. Members may also pay dues with the following credit cards: MasterCard, Visa, or American Express

CREDIT CARD PAYMENT FORM

Members may use this form to make all payments: Dues and Annual Meeting fee and tax-deductible contributions to the Society's Endowment and Graduate Student Support Funds. Please indicate total payment below.

\*Please check appropriate credit card:

. . . MasterCard . . . Visa . . . American Express

\*Name exactly as it appears on your card: \_\_\_\_\_

\*Your Billing Address – Street, City, State, Zip, Country (as recorded by the bank holding your credit card account):

\_\_\_\_\_
\_\_\_\_\_

\*Your Email Address (required for receipt): \_\_\_\_\_

\*Credit Card Number: | \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_ | \_\_\_\_\_ |

\*Credit Card Code (Three or Four Digit Number): \_\_\_\_\_ \*Expiration Date: \_\_\_\_\_

\*Total Payment: \$ \_\_\_\_\_

\*SIGNED: \_\_\_\_\_

\*Required Information (We cannot process your payment if you do not provide this information.)

