



LASSO The Linguistic Association of the Southwest

2009 Membership Application___ or Membership Renewal___

(Please print)

Name: _____

Mailing Address: _____

Institutional Affiliation (if not given above): _____

Telephone: Home: (_____) _____ - _____ Fax: (_____) _____ - _____

Office: (_____) _____ - _____

E-mail Address: _____

Annual Dues: Regular -- \$40 US _____

Student/retired/unemployed -- \$25 US _____

Institutional -- \$60 US _____

Overseas postage surcharge: \$15 annually _____

Life membership: \$450 US _____

Tax-deductible contribution _____

TOTAL ENCLOSED _____

Make check payable to "LASSO." Your canceled check will be your receipt. Return this form with your remittance to: Dr. Regina Morin, Executive Director of LASSO, TCNJ, Modern Languages, P.O. Box 7718, Ewing, NJ, 08628

Visit our website at <http://clas.cudenver.edu/lasso/>