

2024

Individual Member Dues

MT/CLS, Student or Postdoctoral Dues (Include a letter from your lab director or mentor):

First year of Membership
Thereafter, per year

Corporate Dues

PLEASE CIRCLE APPROPRIATE CATEGORY

\$200.00

## REMITTANCE - 2024 AMLI MEMBERSHIP DUES DUES ARE FOR THE CALENDAR YEAR (Please PRINT in BLACK ink)

Name	Degree			
Institution of Employment				
Address Home Office				
City	State		Zip	
Phone	(o)			(h)
Fax	(cell)			
E-Mail				
PAYMENT:				
<b>By Check:</b> Enclosed is my check in the amount of \$		(made payable to AMLI)		
By Credit Card: Please charge my VISA_	Mastercard _	(we do not accept Amex	x) \$	
Credit Card #		Expiration Date	CVV Code	
Billing Address (If different from above)				
City	State		Zip	
Name as it appears on card (please print):_				
Signature (for credit card payment only):				

PLEASE COMPLETE THIS FORM IN ITS ENTIRETY, INCLUDE WITH YOUR PAYMENT AND SEND TO:

LISTSERV: 

Please register me for AMLI's ListServ using email address above. See:

https://www.amli.org/educational-tools/amli-listserv/