

Please complete all applicable fields on the registration form. If you have any questions, please contact Member Services. We look forward to welcoming you to the ASTA community.



703-279-2113



www.astastrings.org



Fax form: 703-279-2114  
 Mail form: 4155 Chain Bridge Rd.,  
 Fairfax, VA 22030

## Who recruited you to join ASTA?

RECRUITER NAME

RECRUITER CITY/STATE

RECRUITER E-MAIL ADDRESS

## Membership Category

- Professional member
- Student member: full time student *[Please provide expected Graduation Date (MM/YY)]* \_\_\_\_\_ / \_\_\_\_\_
- Senior member: age 62 or older
- Dual: two professionals at same address *[Please complete two separate forms]*

## Contact Information

- Mr.  Mrs.  Miss  Ms.
- Dr.  Prof.  Other \_\_\_\_\_

What is your gender?  Female  Male  Prefer not to answer

FIRST NAME MIDDLE INITIAL LAST NAME

EMAIL ADDRESS

PRIMARY PHONE:  WORK  HOME

CELL PHONE

Select a primary address where you will receive correspondence & if applicable, *AST Journal*.  Home  School/Work

### HOME ADDRESS

STREET

CITY STATE ZIP

COUNTRY

### SCHOOL/WORK ADDRESS

*(Required for Professional & Student Members)*

SCHOOL/ORG. NAME DEPT./MAIL STOP

STREET

CITY STATE ZIP

COUNTRY

## Tell Us About You

*(Required for professional/senior and dual members)*

### What is your primary profession?

- Higher Education
- K-12
- Student
- Private Studio
- Performer
- Conductor
- Retired
- Music Administrator
- String Enthusiast

What year did you start teaching music? \_\_\_\_\_

### What level do you teach? *(Select all that apply.)*

- Elementary [K-5]
- Middle [6-8]
- High School [9-12]
- Collegiate (Undergrad & Graduate)
- Adult

### What is your primary instrument?

- Violin
- Viola
- Cello
- Double Bass
- Guitar
- Brass
- Percussion
- Harp
- Piano
- Woodwind

## ASTA State Chapter

Your membership dues include state chapter membership. To find your state information, visit [www.astastrings.org](http://www.astastrings.org).

## Dues Payment

- \$116: Professional Member
- \$57: Student member
- \$85: Senior Member
- \$162: Dual (age 62 or older)

### “ADD ON”

- \$15: Membership certificate
- \$7: Membership pin

TOTAL

\$ \_\_\_\_\_

### PAYMENT INFORMATION

- Check—make payable to ASTA (U.S. funds only)  
 Check No. \_\_\_\_\_
- Visa  MasterCard  American Express

CARD NO. EXP. DATE CVV

NAME ON CARD SIGNATURE (PAYMENT AUTHORIZATION)

By completing this form, I confirm that this information is true and accurate to the best of my knowledge. Dues are nontransferable and nonrefundable. There is a \$30 charge for all items returned from the bank.