

## ASOR INSTITUTIONAL MEMBERSHIP APPLICATION

Name of Institution:				
Name of Institutional Representative:				
Institutional Representative email address:				
Billing Address (invoices sent here):				
City	State	Zip	Country	
Shipping Address (publications sent here):				
City	State	Zip	Country	

## Institutional Membership Privileges

## Faculty, students, and staff of your member institution will receive the following benefits:

- Voice and vote at annual membership meeting (through your institutional representative)
- Subscriptions to ASOR publications for your library (*Near Eastern Archaeology* (NEA), *Bulletin of the American Schools of Oriental Research* (BASOR), and the *Journal of Cuneiform Studies* (JCS))
- Discount of 33% on ASOR books purchased by your library
- Discounts on Annual Meeting registration for students affiliated with your institution
- Eligibility to apply for ASOR fellowships, grants, and scholarships, including travel grants to attend the ASOR Annual Meeting, and Platt and Heritage Fellowships, which support field research
- Access to fellowships, grants, and scholarships offered by our affiliate overseas research centers in Amman, Jerusalem, and Nicosia
- Recognition in ASOR publications such as BASOR, NEA, News@ASOR, and the ASOR Annual Meeting Program Book
- Focus articles in NEA on special events, programs, and faculty of member institutions
- Quarter page advertisement or announcement (upon request) of special programs or institutional member events once a year in NEA



Being cognizant of the work of the American Schools of Oriental Research in support of archaeological and historical studies in the Middle East and Eastern Mediterranean regions throughout the past century; and with acceptance and understanding of its purposes as described in its Mission Statement, which can be found on our website: I hereby apply on behalf of:

to become an Institutional Member of ASOR. I understand that, upon payment of prescribed annual dues of \$1000, our institutional representative will have privilege of vote in the annual Member Meeting. In addition, I understand that our institution will receive regular issues of ASOR's published journals, and that our institution's faculty and students will be eligible to apply for fellowships and other grant awards administered by ASOR, and to participate in other ASORsponsored projects and activities.

Signed:	

Print Name\_\_\_\_\_ Date\_\_\_\_\_

Complete this order form and return it with your payment to ASOR, 209 Commerce Street, Alexandria, VA 22314. Phone: (703) 789-9229. Payment may be made by credit card or by check drawn on a U.S. or Canadian bank in U.S. funds.