

India New Member Application

ASM International brings you the best technical resources, conferences, expositions, courses, meetings, and professional networks! ASM offers a variety of individual membership options to meet your needs as well as Affiliate Society memberships for a low annual fee.

Individual Membership Options (select only one)	Annual Rate
<input type="checkbox"/> ASM Only (includes a one-time \$10 initiation fee, renews at \$54 per year).....	\$64.00
<input type="checkbox"/> EDFAS – Electronic Device Failure Analysis Society Only	\$88.00
<input type="checkbox"/> ASM Student Membership (full-time middle or high school).....	\$15.00
<input type="checkbox"/> Material Advantage Student Membership (www.materialadvantage.org).....	\$30.00
A full-time, post-secondary student interested in receiving member benefits and supporting ACerS, AIST, ASM and TMS.	
<input type="checkbox"/> SCTE – Society of Carbide and Tool Engineers	\$117.00
<input type="checkbox"/> Chapter Sustaining Membership (Rates vary per chapter. Call 1.800.336.5152 ext. 5651 for rate).....	\$_____00
A company, institution or individual interested in supporting local chapter efforts. Specify chapter _____.	

Additional Affiliate Membership Options (check those you want to join):	Annual Rate
<input type="checkbox"/> HTS – Heat Treating Society (www.asminternational.org/hts).....	+\$25.00
<input type="checkbox"/> IMS – International Metallographic Society (www.metallography.net).....	+\$25.00
<input type="checkbox"/> TSS – Thermal Spray Society (www.asminternational.org/tss).....	+\$30.00
<input type="checkbox"/> SMST – International Organization on Shape Memory and Superelastic Technologies (www.smst.org).....	+\$50.00
<input type="checkbox"/> EDFAS – Electronic Device Failure Analysis Society (www.edfas.org).....	+\$25.00

Total: \$_____00

TOTAL PAYMENT (in U.S. Dollars)

Check enclosed (Payable to ASM International) \$_____

Please charge my credit card:

Visa MasterCard American Express Discover Diners Club

Charge Card # _____ Exp. Date _____

Signature for Credit Card Authorization _____ Date _____

PLEASE PRINT CLEARLY OR TYPE:

Preferred Billing Address:

Residence Business

Preferred Mailing Address:

Residence Business

Circle One:

Mr. Ms. Mrs. Dr. Prof.

Name (First, Initial, Last)

Position/Title	Division/Subsidiary	Company
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Business Address

City	State/Country	Zip/Postal Code
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Business Phone Number	Business Fax Number	Email Address (required)
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Residence Address

City	State/Country	Zip/Postal Code
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Residence Phone Number	Residence Fax Number	
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Mail or fax to 440.338.4634. Questions? Phone 800.336.5152, ext. 0.
Mail payment to ASM International, Member Services Center,
9639 Kinsman Road, Materials Park, OH 44073-0002.