

The Linguistic Association of the Southwest 20__ Membership Application__ or Membership Renewal___

Name:	
Mailing Address	ss:
Institutional Affi	iliation (if not given above):
Telephone:	Land line: ()
	Mobile ()
E-mail Address:	
Annual Dues:	Regular: \$75 US
	Student/retired/unemployed: \$30 US
	International: \$85 US
	Life membership: \$600 US

Make check payable to "LASSO". Your canceled check will be your receipt. Return this form with your remittance to: Patricia Gubitosi, LASSO Treasurer, 422 Herter Hall, University of Massachusetts Amherst, 161 Presidents Drive, Amherst, MA 01003.

Visit our website at http://lassoling.org

TOTAL ENCLOSED \$_____