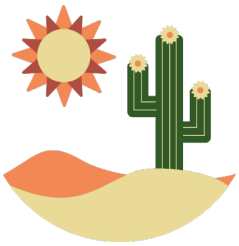

LASSO The Linguistic Association of the Southwest

2025 Membership Application___or Membership Renewal___

(Please print)

Name: _____

Mailing Address: _____

_____

_____

Institutional Affiliation (if not given above): _____

Telephone: Home: (_____)_____- _____ Fax: (_____) _____- _____

Office: (_____) _____-_____

E-mail Address: _____

Annual Dues: Regular -- $75 US _____

Student/retired/unemployed -- $30 US _____

Institutional -- $60 US _____

Overseas postage surcharge: $15 annually _____

Life membership: $600 US _____

Tax-deductible contribution _____

TOTAL ENCLOSED _____

Make check payable to "LASSO." Your canceled check will be your receipt. Return this form with your remittance to:

Dr. Patricia Gubitosi, LASSO Treasurer
422 Herter Hall
University of Massachusetts Amherst
161 Presidents Dr
Amherst, MA 01003

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