

AGA Membership Application

I. Membership Data/Dues

Please choose a membership category and fill in the appropriate dues from the list on the back of this application. By joining, you allow AGA to contact you via email regarding member-related activities.

- Full Government** — \$100/year — This class of membership is available to individuals currently working in government, academia and not-forprofit organizations.
- Private Sector** — \$160/year — This class of membership is available to sole proprietors and those working for private companies, corporations or partnerships.
- Early Career** — \$45/year — This class of membership is available to individuals with fewer than three years of professional experience who work in private or public sector.
- Student (full-time)** — \$30/year — This class of membership is available to full-time college/university students who are not gainfully employed.

Primary Chapter SILICON VALLEY Dues 45

Additional Chapter Membership(s) Optional _____ Dues _____
(please refer to list on the reverse side)

II. Name & Home Address

Mr. Mrs. Ms. Dr. Prof. | male female

Preferred Address: Home Business

Name FIRST _____ MIDDLE _____ LAST _____

Home Address _____ Apt/Suite# _____

City _____ State/Province _____ ZIP Code _____ Country _____

Home Phone _____ Home Email _____

III. Business Information

Job Title _____ Dept. _____

Organization _____

Business Address _____ Apt/Suite# _____

City _____ State/Province _____ ZIP Code _____ Country _____

Business Phone _____ Business Email _____

Employer:

- Federal State County City
 Nonprofit Private Academia Student

Responsibility area:

- Academia – Full Time Academia – Adjunct Accounting Administration Auditing Budgeting
 Consulting Financial Management Grants Management Information Systems Investigation Legal
 Other Management/Admin. Performance Mgmt. Program Mgmt.

How did you hear about AGA?

- AGA Chapter AGA Conference AGA Email AGA Publication CGFM Program
 Direct Mail Employer Friend/Co-Worker Internet Non AGA Conference

Birth year: _____

Highest degree attained: Associate Bachelor's Law/Judicial Master's Doctorate

Certifications:

2208 Mount Vernon Avenue
Alexandria, VA 22301

800.AGA.7211
703.684.6931

www.agacgfm.org
agamembers@agacgfm.org



IV. Sponsor's Name

(if applicable) _____ Member ID # 37061

V. Method of Payment

Total Amount Enclosed: _____

Check enclosed (make check payable to AGA) Charge to my: VISA MasterCard American Express Discover

Card Number _____ Expiration Date _____

Signature _____

Printed Name _____