Application for Membership to:

The American Scientific Glassblowers Society

P.O. Box 453
Machias, NY 14101
(716) 353-8062 ● Fax (716) 353-4259
natl-office@asgs-glass.org
http://www.asgs-glass.org

Membership, and membership classification within the ASGS is governed by our Bylaws.
Please read and understand the following during your application process:

By-laws: Article III, Membership

Section 1, Qualifications

b) ***REGULAR MEMBERSHIP*** *may be granted to those persons who have for five consecutive years and currently gain the major portion of their income as a scientific glassblower.*

c) ***JUNIOR MEMBERSHIP*** *may be granted to those persons who are actively engaged in scientific glassblowing with less than five years experience*

d) ***ASSOCIATE MEMBERSHIP*** *may be granted to those persons who have a close association with, or interest in, the glassblowing field.*

e) ***RETIRED MEMBERSHIP*** *may be granted upon application from any member who is no longer able to perform glassblowing duties due to accident, illness or retirement and has been a Regular member in good standing for a period, which is at least the difference between the member's age and 70 years.*

f) ***LIFETIME MEMBERSHIP:*** *the Board of Directors may bestow Lifetime membership upon that person who has been an active member of the Society and who has performed outstanding service to the Society or has made significant contributions to the art of scientific glassblowing. No more than three Lifetime memberships may be bestowed in any one year. All nominations for Lifetime membership should include a biographical sketch outlining such contributions.*

h) ***INTERNATIONAL MEMBERSHIP*** *may be granted to those persons residing in areas not represented by the Board of Directors, outside the continental United States and Canada.*

i) ***STUDENT MEMBERSHIP*** *may be granted to those persons who are actively enrolled in an accredited Scientific Glassblowing curriculum such as the Salem Community College Program. Only two years of eligibility are allowed.*

k) ***ARTISTIC MEMBERSHIP*** *may be granted to those persons who actively participate in the art of artistic glassblowing.*

July 26, 2010

I the undersigned, having read above the portion of Section 1 of Article III of the Bylaws of the American Scientific Glassblowers Society, do hereby qualify and apply for membership as a:

☐**Regular Member** ($100) ☐**Associate Member** ($100) ☐**Junior Member** ($75) ☐**Artistic Member** ($100)

☐**Student Member** ($30) ☐**International Member** ($125.00) ☐**Retired Member** ($50)

I also agree to abide by the Charter and Bylaws of the American Scientific Glassblowers Society, which govern the Society, and any and all amendments to said Charter and Bylaws which may be necessary to add in the future so long as I remain a member.

I understand that the annual membership period is on a calendar year basis and that dues are payable on January 1 of each year. Any person whose membership has lapsed or has resigned from the Society may rejoin by paying the current dues and verifying with the National Office that their membership classification has not changed under the rules laid down in Section 5, paragraph b.

Local Section affiliation preference (check **one** only)

____Canadian	____Delaware Valley	____Exhibitor*	____Great Lakes
____Midwest	____Northeast	____Pacific Northwest	____Southeastern
____So. California	____Southwest	____Rocky Mountain	____not sure

* The Exhibitor's Section is reserved for Exhibitors of the ASGS. For more information, contact the Membership Chair at <membership@asgs-glass.org>

Formal Education and Glassblowing Experience: (Optional)

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___**Referred by:** (Optional)

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Please send mailings to my: ☐**Home address** ☐ **Work address**

Please check phone number to be listed in membership roster (optional) (check one or both)

Last Name	First Name		Middle Initial
Employer/Organization	Position Held		Time Employed
Work Address			
City	State/Province	Zip Code	Country
☐Work Phone	Fax	Email Address	
Home Address			
City	State/Province	Zip Code	Country
☐Phone	Date of Birth	Email Address	
Payment ☐ Visa ☐ Master Card ☐ American Express ☐ Discover ☐ Check Payable to **American Scientific Glassblowers Society** in US$		Credit Card Number	
Signature	Card Holder(Print)		Exp. Date