



# WESTERN AGRICULTURAL ECONOMICS ASSOCIATION

## 2017 WAEA Membership Application & Renewal Form

### Member Information

Name: \_\_\_\_\_

Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip, Country: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

### Type of Membership

All memberships include a subscription to the *Journal of Agricultural and Resource Economics*, Volume 42. Members are not guaranteed shipment of journals or newsletters published prior to their membership date.

	<u>Domestic</u>	<u>International</u>
Regular (JARE-printed copy)	<input type="checkbox"/> \$55	<input type="checkbox"/> \$75
Regular (JARE-electronic copy)	<input type="checkbox"/> \$40	<input type="checkbox"/> \$40
Student** (JARE-printed copy)	<input type="checkbox"/> \$25	<input type="checkbox"/> \$40
Student** (JARE-electronic copy)	<input type="checkbox"/> \$5	<input type="checkbox"/> \$5
Senior* (JARE-printed copy)	<input type="checkbox"/> \$45	<input type="checkbox"/> \$60
Senior* (JARE-electronic copy)	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30
Family (one JARE-printed copy)	<input type="checkbox"/> \$80	<input type="checkbox"/> \$110
<i>Other Family Member</i> _____		
<b>* Retired full-time from their full-time job</b>		
<i>** I certify that the person named above is eligible for student membership</i>		
<i>Department Head or Staff Member</i> _____		

### Payment Information

Check (U.S. funds drawn on U.S. bank payable to WAEA)

Credit Card #: \_\_\_\_\_

Expiration date: \_\_\_\_\_

Name on card: \_\_\_\_\_

### Contact Information

Completed forms and payment may be submitted to:

Mail: WAEA  
555 East Well St. Suite 1100  
Milwaukee, WI 53202

Fax: (414) 276-3349

Phone: (414) 918-9802

Email: [info@waeaonline.org](mailto:info@waeaonline.org)

Web: [www.waeaonline.org](http://www.waeaonline.org)