

VERMONT ACADEMY OF ARTS AND SCIENCES MEMBERSHIP APPLICATION FORM

I (we) would like to join the Vermont Academy of Arts and Sciences to help support the mission and the free-to-the-public educational activities of VAAS:

- Organizing an annual Fall Conference with a Vermont focus
- Organizing an annual Spring Intercollegiate Student Symposium for college students throughout the state
- Recognizing outstanding Fellows of the Academy
- Providing Grants to high schools to support science research projects
- Providing Cash Awards for high school students at the Vermont Science Fair and Vermont History Day
- Producing a quarterly Newsletter and other Occasional Publications.

Annual Dues

Student Membership: \$15 _____

Individual Membership: \$25 _____

Family Membership: \$35 _____

Sustaining Membership: \$50 _____

Institutional Membership: \$100 _____

Benefactor: \$100 or more _____

Total enclosed: \$ _____

Name (s): _____

Address: _____

e-mail: _____ Phone: _____

Make Checks payable to: **VAAS**

Send this form along with your check to: **VAAS Membership, 183 Morgan Drive, Shelburne, VT 05482**

Thank you for supporting the VAAS!