THE POWEROF2 APPLICATION

ASTD Chapter & National

Member Information

Please indicate if this is a:

❑ New ASTD Membership ❑ Membership Renewal ❑ Subscription Add-On

Membership # (For Renewal/Add-on) _____

Name

Title

Company

Mailing Address 1

Mailing Address 2

City State Postal Code

Country

Email (For delivery of online benefits; ASTD does not rent or sell email addresses)

Phone 1

Phone 2

Chapter Code, Partner Code, or Global Network

ASTD membership includes *T+D* magazine, member access to www.astd.org, research tools, the annual *State of the Industry Report*, *ASTD Links*, exclusive member discounts, and much more. Learn more at www.astd.org/benefits.

ASTD Membership Dues (Prices include shipping and handling)

I want to enroll or renew as a:

❑ 1 Year National Member
Special offer for ASTD Chapter members

US
$179 ✓ ~~$199~~

Sec. 1 **Subtotal $** 0

Membership Add-Ons (Prices include shipping and handling)

Get specialized content to meet your career development needs with these subscription products.

		US	Outside U.S.	Total
❑ *ASTD Links Plus* This member-only newsletter includes high quality, expanded coverage of learning technologies, career development, learning and development, and human capital management. Content delivers monthly via email with your issue of *ASTD Links*. Subscribers have access to all archived material.		$89/yr	$89/yr	$ _____
❑ *Infoline* Monthly how-to publication with tips and job aids on learning technologies, learning and development, and human capital topics. Quarterly, topic-focused subscriptions also available. www.astd.org/infoline.	**Print**	$99/yr	$139/yr	$ _____
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❑ *Sales Training Drivers* A community of thought leaders and peers as well as world-class resources to improve sales organization performance.		$99/yr	$99/yr	$ _____
❑ *The Public Manager* A unique quarterly journal about federal government leadership that works. Learn more at www.thepublicmanager.org.	**Print**	$49/yr	$87/yr	$ _____
	Electronic	$29/yr	$29/yr	$ _____
		(Sec. 2) Subtotal		$ _____
		Total (Add Sec. 1 and 2)		$ 0

❑ BILLING ADDRESS

(If different from shipping address)

Company

Address

Address

City State Postal Code

Country

PAYMENT INFORMATION

❑ Check drawn on a U.S. bank and payable to ASTD is enclosed.

❑ Please charge the total to my:

❑ VISA ❑ MasterCard ❑ American Express ❑ Discover

Card # _____

Exp. Date ___ / ___ Card Security Code (CVV) _____

Signature Date

SENDING YOUR PAYMENT

Mail: ASTD, Box 1567, Merrifield, VA, USA 22116-1567 • **Phone:** 1.800.628.2783 (U.S.) or 1.703.683.8100 • **Fax:** 1.703.299.8723 • **Email:** customercare@astd.org
Wire Transfer/ACH: Please contact ASTD Customer Care for information. TRANSACTION MUST include name and indicate "ASTD Membership." Please provide a copy of the bank's transaction receipt when submitting this form. **Purchase Order:** Signed P.O., printed on company letterhead, must accompany this application. Dues and subscription prices are subject to change.

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