U.S. Membership Form

Name: _______________________________________________________________________
Address: _____________________________________________________________
City: _____________________________________________________________________
State: ___________________________________________________________________
Zip Code: ___________________________________________________________________
Country: ___________________________________________________________________
Primary Phone: __________________________ Secondary Phone: __________________
Email Address: __________________________________________________________

(Email addresses are collected for JASNA use only. We do not sell, rent, or give them to third parties.)

TYPE OF MEMBERSHIP:
☐ Individual Annual ($30)       ☐ Student Annual (Full-Time) ($18)       ☐ Sustaining Annual ($60)
☐ Individual Life ($500)        ☐ Family Life ($700)*        ☐ Convert Individual Life to Family Life ($200)
*If choosing Family Life Membership, name of second member is required: __________________________

PLEASE CHECK ALL THAT APPLY:
☐ New member       ☐ Renewal       ☐ Change Email/Phone/Address       ☐ Donation
☐ This is a gift. Please indicate that the gift is from:

An Annual Membership starts on the date the membership is processed and expires one year later. For example, a membership that starts on June 1 will be active through May 31 of the following year. When a membership is renewed before it expires, the new membership term will start after the current membership year is completed. Memberships paid by check take 4 to 6 weeks to process after JASNA receives the completed application form and dues.

DUES AMOUNT: $ __________

I ALSO WISH TO DONATE TO:
JASNA is a section 501(c)(3) tax-exempt organization. U.S. members making donations to the entities listed below will receive a U.S. charitable contribution tax receipt.

☐ JASNA (Donations are used to fund the Society’s ongoing programs, strategic initiatives, and expanded member benefits and services.) $ __________

☐ Jane Austen’s House Museum, Chawton, England** $ __________

☐ Austen-related Churches in England $ __________

Total Dues and Donation Amount: $ __________

**If you are donating to Jane Austen’s House Museum, may we share your contact information with them so that they can acknowledge your gift as well? (Not required.) Yes ____ No ____

Mail this form and a check or money order, made payable to JASNA in U.S. dollars, to the U.S./International Membership Secretary:

Carol Moss, 637 Lucerne Rd, Cayucos, CA 93430

Email: membership@jasna.org