

ANNUAL MEMBERSHIP DUES

Membership includes the journal *Demography*, and the on-line newsletter, *PAA Affairs*.

Members of the *International Union of the Scientific Study of Population* (IUSSP) qualify for a special 25% discount* on PAA membership dues for the **first year** of PAA membership. **Must provide IUSSP* Member No.** (if applicable)_____

MEMBERSHIP CATEGORIES

IUSSP Member *\$102
Regular Member \$136
The regular member annual dues include \$20 for the printed version of *Demography*.
Two year special rate. **\$267**

IUSSP Member *\$49
Joint Member \$66
(Regular Member & Spouse)
Receive one copy of the printed version of *Demography*; please complete membership applications for both persons.

IUSSP Member *\$46
Student Member \$62
In order to qualify for student membership, students must have registrar certify that they are registered as a full-time student or attach a photocopy of current student identification.

Emeritus Member \$90
Emeritus members must have paid dues to PAA for 15 years and be retired from regular employment.

Organizational Member \$361
Non-individual membership; receives the printed version of *Demography*.

Citizen and Resident of Low-income Country \$48
On-line *Demography* and *PAA Affairs*, as well as all other benefits of membership. I certify that my membership dues are not paid by a PAA travel award, or a grant and I do not receive an international salary.
Signature_____

Applied Demography Group \$5.00

POPULATION ASSOCIATION OF AMERICA, Founded 1931
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301.565.6710 fax: 301.565.7850 www.populationassociation.org

2016 PAA Membership Application

New Members can opt out of the print version of *Demography* having **online access**; the discounted annual membership rates are \$116 for Regular members, \$70 for Emeritus, \$42 for Students and \$341 for Corporate members. The multi-year membership rate with online access is \$116 for the first year and \$111 for subsequent years for Regular members only.

Name: _____
Last First Middle Initial

Present Employment: (This information will be used for your on-line Membership Directory listing unless otherwise specified below)

Title/Position_____

Organization_____

Address Line 1_____

Address 2:_____

City_____ State/Province_____

Zip/Mail Code_____ Country_____

Mailing Address: _____
(If different from Directory Address)

City_____ State/Province_____

Zip/Mail Code_____ Country_____

Email_____ Work ()_____ ext._____

Fax ()_____ Home ()_____

Membership Dues \$_____

Contribution to the PAA Fund: (optional) \$_____
(Contributions are tax deductible)

Applied Demography Group (optional) \$_____

TOTAL AMOUNT \$_____

Please make check payable in U.S. currency drawn on a U.S. Bank.
Visa, Master Card or American Express. **DO NOT SEND CASH.**

Check Visa Master Card American Express Discover

Cr. Card No. _____ Exp. _____

Signature _____

Name: _____
Last First Middle Initial

Education: Degree Year Granted Institution
Highest Earned _____

Professional Fields
Select 3 in order of importance
____ _

1. Anthropology
2. Business
3. Computer Science
4. Economics
5. Education
6. Genetics
7. Geography
8. History
9. Law
10. Mathematics
11. Medical/Life Science
12. Other
12. Public Administration/Government
14. Public Health/Epidemiology
15. Psychology
16. Sociology
13. Statistics

7. Fertility/Family Planning
8. Population, Development, and the Environment
9. Population and Aging
10. Data and Methods
11. Applied Demography
12. Other

Region of Specialization

- World
- AFRICA
 - Eastern Africa
 - Middle Africa
 - Northern Africa
 - Southern Africa
 - Western Africa
- AMERICAS
 - Caribbean
 - Central America
 - Northern America (not US)
 - South America
 - United States
- ASIA
 - Central Asia
 - China
 - Eastern Asia (not China)
 - India
 - Southern Asia (not India)
 - South-Eastern Asia
 - Western Asia
- EUROPE
 - Eastern Europe
 - Northern Europe
 - Southern Europe
 - Western Europe
- OCEANIA
 - Australia and New Zealand
 - Melanesia
 - Micronesia
 - Polynesia

Major Employment: _____

Select only one

1. Academic/Not Student
2. Business & Industry
3. Federal Government
4. State/Local/Provincial Government
5. International Organization
6. Nonprofit Organization
7. Private Consultant/Self Employed
8. Retired
9. Student
10. Other

Ethnicity: _____

Select only one

1. American Indian/Alaskan
2. Asian Indian
3. Black/Hispanic
4. Black/non-Hispanic
5. Chinese
6. Japanese
7. Korean
8. Other Asian/Pacific Islander
9. White/Hispanic
10. White/non-Hispanic

Areas of Specialization

Select 3 in order of importance
____ _

1. Fertility, Family Planning, Sexual Behavior, and Reproductive Health
2. Marriage, Family, Households, and Unions
3. Children and Youth
4. Health and Mortality
5. Gender, Race, and Ethnicity
6. Migration and Urbanization

Demographic Data

Note: The Demographic and Ethnicity information requested is for PAA records only and will NOT be included in the Directory of Members.

Year of Birth: _____ Gender: _____

Membership is for 12 months following receipt of application. Publications begin with the issue after your membership effective date.