



2008 Individual Membership Application

Name	_____
Mailing Address	_____ _____
City/ State/Zip	_____
Country	_____
Home Phone Number	_____
Business Phone Number	_____
E-mail Address	_____
Employer's Name	_____

Certification, if enrolling as a student member.

Name of College or University:	_____
Department Chair Name:	_____
Date:	_____

Membership dues cover the period January 1, 2008 through December 31, 2008. Members will receive a full subscription to Mathematical Programming Series A and B & Optima Newsletter.

Dues (Regular)	\$ 85.00	_____
Dues (Retired)	\$ 40.00	_____
Dues (Student)	\$ 20.00	_____

Method of Payment

Payment enclosed (Make check or money order payable in your local currency to MPS).

I wish to pay by credit card:

American Express _____ Mastercard _____ Visa _____

Card Number _____ Exp Date _____

I wish to pay by wire transfer (send a bank draft "MPS account # 8618705842" to PNC Bank, 3535 Market Street, Philadelphia, PA 19104; reference ABA Routing # 031000053). Please reference your MPS application and include your name with the draft.

In order to process your membership please send or fax completed application. For your convenience use the enclosed envelope or return the completed form to:

MPS Customer Service
University City Science Center
3600 Market Street, 6th Floor
Philadelphia, PA 19104-2688

Fax: +1 215-386-7999
Email: service@mathprog.org
<http://www.mathprog.org>