



CORPORATE AFFILIATE PROGRAM

ASTRONOMICAL SOCIETY OF THE PACIFIC

APPLICATION

YES, we would like to become a Corporate Affiliate of the ASP for one year. Enclosed with our application is our check for the following level of support:

- \$2,500 - \$4,999 Contributing Affiliate
- \$5,000 - \$9,999 Supporting Affiliate
- \$10,000 - \$24,999 Sustaining Affiliate
- \$25,000 and up Partner Affiliate

NAME APPLICATION DATE

TITLE

COMPANY NAME

STREET ADDRESS CITY STATE, ZIP

E-MAIL ADDRESS

TELEPHONE FAX

PLEASE DESCRIBE YOUR COMPANY (100 WORDS OR LESS)

Thank you! Please send application form and contribution to:

Corporate Affiliate Program
Astronomical Society of the Pacific
390 Ashton Avenue
San Francisco, CA 94112

Telephone: 415-337-1100 Fax: 415-337-5205

Email: corporateaffiliate@astrosociety.org

Membership amount _____

- Check enclosed
- Invoice Requested
- Other (please attach agreement)

Please email a jpeg of your corporate logo (72dpi) and website link to: corporateaffiliate@astrosociety.org

Office Use Only. Start Date _____