



MEMBERSHIP APPLICATION

NAME: _____ TELEPHONE: _____
 COMPANY: _____ EMAIL: _____
 JOB TITLE: _____
 ADDRESS: _____ SEASONAL ADDRESS: _____
 CITY: _____ CITY: _____
 STATE: _____ COUNTRY: _____ ZIP: _____ STATE: _____ COUNTRY: _____ ZIP: _____
 REFERRED BY: _____

CORPORATE MEMBERSHIP OPTIONS

- PIONEER/HIGH GRADE \$15,300.00
[One individual listed and fourteen corporate extras]
- PRODUCERS \$10,200.00
[One individual listed and nine corporate extras]
- DEVELOPERS \$5,100.00
[One individual listed and four corporate extra]
- EXPLORERS \$2,550.00
[One individual and one corporate extra]
- BUSINESS MEMBERS \$1,020.00
(One individual listed under membership)

INDIVIDUAL MEMBERSHIP OPTIONS

- OPERATOR MEMBER..... \$300.00
[Heavy equipment or mine operator]
- PROFESSIONAL MEMBER..... \$300.00
[Lawyers, bankers, dentists, accountants, etc.]
- INDIVIDUAL MEMBER..... \$125.00
- SPOUSAL CO-MEMBER..... \$25.00
Name: _____
- STUDENT MEMBER..... \$25.00

PROFESSIONAL SPECIAL INTERESTS & COMMITTEES

[check any that apply]

- | | | |
|---|--|--|
| <input type="checkbox"/> Coal mining | <input type="checkbox"/> Exploration | <input type="checkbox"/> Offshore mining committee |
| <input type="checkbox"/> Convention committee | <input type="checkbox"/> Federal oversight committee | <input type="checkbox"/> Professional services |
| <input type="checkbox"/> Engineering/development | <input type="checkbox"/> Hard rock mining | <input type="checkbox"/> Sand, gravel, & quarry mining |
| <input type="checkbox"/> Environmental & permitting | <input type="checkbox"/> Health & safety committee | <input type="checkbox"/> State oversight committee |
| <input type="checkbox"/> Equipment & supplies | <input type="checkbox"/> Legal | <input type="checkbox"/> Other _____ |

MEMBERSHIP PAYMENT INFORMATION

INVOICE ME CHECK ENCLOSED

CREDIT CARD CARD NUMBER: _____

EXPIRATION DATE: _____ SECURITY CODE/CID: _____

BILLING ADDRESS:
(IF DIFFERENT FROM ABOVE)

SIGNATURE: _____ DATE: _____

Please return your completed application to jennifer@alaskaminers.org

Or mail your application to the AMA office located at 121 W. Firweed Lane, Ste 120, Anchorage AK 99503

****NOTE: 20% of annual dues must be considered as funding for federal and state lobbying activities and therefore are non-deductible when figuring your federal income taxes.**