

SPECIAL OFFER! – URISA & NEURISA CHAPTER MEMBERSHIP – BETTER TOGETHER!



Until March 31, 2019, you can join URISA and the New England URISA Chapter for only \$100 (normally \$195) or take advantage of even greater savings and join for only \$150 for two years! Networking, information sharing and professional development are just some of the benefits that URISA members enjoy year-round. Whether it is participating in our signature training and education programs, contributing to any of our many committees or adding your voice to issues that matter, URISA is your touch point to the GIS profession.

We invite you to join and engage with URISA to build a stronger association and contribute to the growth of the GIS profession!

Fine print:

1. The offer is valid for individual professional members (normally \$195) and also for young professional members (normally \$125). Student membership is still only \$20/year.
2. Membership will be active through December 31, 2019 or through December 31, 2020 if you join for two years.
3. This offer is not valid for anyone who was a member in 2017 or 2018.

SPECIAL OFFER Valid until March 31, 2019	Amount Due:
	Individual (including young professionals): <input type="checkbox"/> One year \$100 <input type="checkbox"/> Two years \$150 Are you a young professional (35 years of age or younger)? <input type="checkbox"/> Yes <input type="checkbox"/> No Student (requires proof of full-time student status): Until December 31, 2018: <input type="checkbox"/> \$20 January 1-March 31, 2019: <input type="checkbox"/> \$15

Name _____

Job Title _____

Organization _____

Address (Home or Office) _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____

Phone _____ Fax _____

By providing your email address, you will receive periodic emails from URISA (primary communication method for association news, publications).
E-mail _____

Is your membership dues supported (paid for or reimbursed by) your employer? Yes No

Please enter social information where appropriate:

Facebook: _____ Twitter: _____ LinkedIn: _____

Method of Payment (in US dollars) Check enclosed (\$30 fee for all returned checks)

VISA MasterCard American Express

Amount \$ _____ Date _____

I authorize URISA to charge my credit card account # _____

Expiration Date _____ Signature _____

Return completed form with payment to: URISA, PO Box 1247, Bedford Park, IL 60499-1247 USA
phone: (847) 824-6300, fax: (847) 824-6363 info@urisa.org www.urisa.org