

Corporate Partnership Application

Corporate Partner Dues

- \$500 (2017 Introductory Rate)
 \$750 (2018 and Beyond Rate)

Sapphire Partner Dues

- \$2,250 (2017 Introductory Rate)
 \$3,500 (2018 and Beyond Rate)

Diamond Partner Dues

- \$5,000 (2017 Introductory Rate)
 \$7,500 (2018 and Beyond Rate)



1 year (Expires 12/31/18)

2 years (Expires 12/31/19)

Become an ACerS Corporate Partner for two years and secure the 2017 discounted Introductory Rate both years.

Company Name

Address

City State/Province Postal Code Country

Primary Contact Name Phone E-mail Fax

Please provide names and titles of your Corporate Individual Members:

1. Dr. Prof. Mr. Ms. Mrs. _____
Name Title
Phone Email Division(s)/Section

2. Dr. Prof. Mr. Ms. Mrs. _____
Name Title
Phone Email Division(s)/Section

3. Dr. Prof. Mr. Ms. Mrs. _____
Name Title
Phone Email Division(s)/Section

4. Dr. Prof. Mr. Ms. Mrs. _____
Name Title
Phone Email Division(s)/Section

5. Dr. Prof. Mr. Ms. Mrs. _____
Name Title
Phone Email Division(s)/Section

6. Dr. Prof. Mr. Ms. Mrs. _____
Name Title
Phone Email Division(s)/Section

*Diamond partners please contact Kevin Thompson at kthompson@ceramics.org to add up to 4 additional individual members.

Division Affiliation (optional)

Unlimited Divisions for each individual are included in your Corporate Partnership dues. Please write free divisions above for each person.

Art, Archaeology & Conservation Science	Engineering Ceramics	Refractory Ceramics
Basic Science	Glass & Optical Materials	Structural Clay Products
Cements	Manufacturing	
Electronics	Nuclear & Environmental Technology	

Section Affiliation (optional)

Corporate Individuals may join a local Section. Please indicate Section above for each person.

Central Pennsylvania	Michigan/NW Ohio	Pittsburgh
Eastern Washington	New England	St. Louis
Florida	New Mexico	Western New York
Hudson-Mohawk Valley	Northern Ohio	

Payment

Payment Method— must be in \$U.S. and drawn on a U.S. bank.

Check for \$ _____ enclosed. (PAYABLE TO: THE AMERICAN CERAMIC SOCIETY.)

Charge \$ _____ to my credit card: VISA MC AMEX

CREDIT CARD NUMBER CVV (3 OR 4 DIGIT NUMBER ON BACK)

EXP. DATE

NAME ON CREDIT CARD

SIGNATURE

Remit to:

The American Ceramic Society
L-2625, PO Box 600001
Columbus, OH 43260-2625 USA
Ph: 866-721-3322, option 6 (inside U.S.) • 1-240-646-7054 (outside U.S.)
Fax: 240-396-5637 • www.ceramics.org
customerservice@ceramics.org