



# ICOM-US Membership Application, 2010

**PLEASE NOTE: ICOM memberships are for the calendar year. All 2010 memberships expire on December 31, 2010. New memberships are processed at the ICOM Secretariat in Paris. Please allow 10 weeks for delivery.**

**ICOM-US Membership Categories**

**Individual** for museum professionals & those in related nonprofit fields only

Regular	\$110	<input type="checkbox"/>
Associate	\$230	<input type="checkbox"/>
Contributor	\$330	<input type="checkbox"/>
Retired	\$50	<input type="checkbox"/>
Student	\$50	<input type="checkbox"/>

Students must include a copy of a valid student ID. Only those in museum studies or related programs are eligible.

**Institutional** for museums & related nonprofits only; dues are based on Annual Operating Budget

Institution 1 (less than \$45,000)	\$440	<input type="checkbox"/>
Institution 2 (\$45,000 - \$150,000)	\$550	<input type="checkbox"/>
Institution 3 (\$150,000 - \$1,500,000)	\$810	<input type="checkbox"/>
Institution 4 (\$1,500,000 - \$15,000,000)	\$1,110	<input type="checkbox"/>
Institution 5 (\$15,000,000 +)	\$2,310	<input type="checkbox"/>
Sustaining	\$3,365	<input type="checkbox"/>
Contributing	\$7,000	<input type="checkbox"/>

**Supporting** open to non-museum professionals & organizations; non-voting

Individual	\$460	<input type="checkbox"/>
Institutional	\$8,465	<input type="checkbox"/>

- Applicants must be US residents to join.
- Non-AAM members pay a \$20 service charge. To become an AAM member, please complete the [AAM Individual](#) or [AAM Institutional](#) membership form.
- Remember to join ICOM International Committees.

**Contact Information**

AAM Membership Number	Expiration Date
Name: Mr/Ms/Mrs/Miss/Dr/Prof	Last First
Position/Title	
Work Address (line 1)	
Work Address (line 2)	
Email Address	
Daytime Phone	
Daytime Fax	
Mailing Address (line 1)	
Mailing Address (line 2) if different	

**Signature**

I have read and subscribe to the [ICOM Code of Ethics \(www.icom.org\)](http://www.icom.org). I am not an art dealer.

Signature	Date
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**Total Payment**

All memberships must be prepaid. You may return this form with a check made payable to AAM, or you can charge your membership to Visa, Master Card, or American Express.

ICOM-US Dues \_\_\_\_\_

Service Charge (Non-AAM Members only) \$20 \_\_\_\_\_

Contribution \_\_\_\_\_

**Total** \_\_\_\_\_

Check payable to AAM       Visa

MasterCard                       American Express

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

Authorized Signature \_\_\_\_\_

Note: The above will be electronically processed for improved service from ICOM, ICOM-US, and International Committees. **Contact information only** may be electronically transmitted to third parties (i.e. International Committees). In conformity with the French law on Informatics & Civil Liberties (Jan. 6, 1978, rev.) you have the right to access and modify the information that concerns you, and you may opt out of electronic transmission of your data.

I do not wish for my personal data (**contact information only**) to be transmitted via the Internet. I understand this may delay processing of my membership.

**Return to**

**ICOM-US**  
**American Association of Museums**  
**1575 Eye St NW, Ste 400**  
**Washington, DC 20005**  
**fax: 202/289-6578**  
[icomus@aam-us.org](mailto:icomus@aam-us.org)