

MATHEMATICAL OPTIMIZATION SOCIETY

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2017 Individual Membership Application or Renewal

Name _____
Mailing Address _____ _____
City/ State/Zip _____
Country _____
Home Phone Number _____
Business Phone Number _____
E-mail Address _____
Employer's Name _____

Certification (if enrolling as a student member).
Name of College or University: _____
Department Chair Name: _____ Date: _____

Membership dues cover the period January 1, 2017 through December 31, 2017. Members will receive print and electronic subscriptions to Mathematical Programming Series A and B, Mathematical Programming Computation, and Optima. If you prefer not to receive print copies, please check one or both of the following boxes:

- I do NOT wish to receive print issues of the Journals (Mathematical Programming Series A and B, Mathematical Programming Computation).
- I do NOT wish to receive print issues of Optima.

Membership Options

Dues (Regular) \$ 90.00 _____

Dues (Retired) \$ 45.00 _____

Dues (Student) \$ 22.50 _____

Dues (Lifetime) .8*(65-a)*\$90 Where "a" is your current age.

(Minimum payment is \$225)

Method of Payment

- Payment enclosed (Make check or money order payable in your local currency to MOS).
- I wish to pay by wire transfer. Please contact service@mathopt.org for bank information.

Please mail your payment along with the completed application to the address listed above. Thank you.