



JOIN US AS A Student Member

If you are interested in a industrial affiliation or professional membership, please request or download the appropriate form at asev.org.

Dear Applicant:

Thank you for your interest in becoming a student member of the American Society for Enology and Viticulture.

Student membership in the Society is available to any undergraduate or graduate student at an accredited institution of higher learning who is currently enrolled: (a) as a full-time student, and (b) in an enology or viticulture DEGREE program or a closely related scientific field of study. Certificate program enrollees are not eligible for Student Membership. Closely related scientific fields of study are deemed to be those with academic programs inclusive of enology or viticulture related coursework and research (for graduate studies, thesis or professional). Please note that if we are not familiar with your particular academic program, then we may need your assistance in obtaining additional information. Employment is not a criteria for student membership.

Your student membership benefits are based on the calendar year (January–December) and will include:

- Annual online subscription to the American Journal of Enology and Viticulture (AJEV), including online access to full AJEV archives from 1950
- Reduced rates on all other ASEV publications
- Reduced rates on open access publication fees
- Significantly reduced membership registration rates to the ASEV National Conference, Unified Wine & Grape Symposium and other ASEV sponsored events for each year of membership
- Access to the online (searchable) ASEV Membership/Affiliate Directory

If your application is received on or after October 1, your membership will be activated for the next calendar year unless you request otherwise on the application. You must be a current member during the calendar year of any ASEV-hosted event to benefit from reduced registration rates. Online access to AJEV will become active on January 1. If you opt for membership at this point in the current year, you will be sent an invoice for the upcoming year dues.

If you need additional information on the Society, please visit www.asev.org or contact our office.

Sincerely,

American Society for Enology and Viticulture



AMERICAN SOCIETY FOR
ENOLOGY AND VITICULTURE
Advancing Knowledge. Inspiring Solutions.
Since 1950

APPLICATION FOR Student Membership

*If you are interested in a industrial affiliation or professional membership,
please request or download the appropriate form at asev.org.*

INSTRUCTIONS: Please read carefully. Incomplete applications cannot be considered. ASEV is dependent on your complete information in order to activate your membership. **Please type or print clearly.** Illegible applications will be returned. You can also apply online at asev.org.

Personal Information

Dr. Mr. Miss Ms. Mrs. Mx. Have you ever been an ASEV Member? Yes No If known, what year(s)? _____

Last Name

First Name

Address

Address Line 2 (apt, suite, PO box, etc)

City

State/Province

Zip/Postal Code

Country

Email Address

*Newsletters, Technical Updates, conference announcements, and other important
information are sent by email only.*

Mobile Phone

Program Information

Student membership is extended for two years maximum for Associate Science degree, five years maximum for undergraduate degree, three years maximum for masters degree and four years maximum for doctorate degree. Certificate programs do not qualify.

Institution you are currently attending on a full-time basis

Declared major field of study (ex. Fermentation Science)

Official name of degree (ex. Food Science-Enology)

If you are not pursuing a degree directly in enology or viticulture, you are required to describe your science degree program as it relates to these fields of study to be eligible for Student Membership. Please use additional sheet if necessary. Certificate program enrollees are not eligible for Student Membership.

Type of degree program you are enrolled in full time: AS BS MS PhD Other degree: _____
(If your degree is not listed, please mark the one that is most similar.)

Number of years to obtain degree in your current degree program: _____

Date degree is expected: _____

MM / YYYY

Academic Advisor's Verification

I verify that this student is enrolled **full-time** in a qualified degree program as stated in the instructions and as indicated above. Part-time enrollment does not qualify for student membership, and certificate programs do not qualify.

Institution	Phone Number	Email
Printed Name	Signature	Title

Student Membership Dues

ASEV Membership and the corresponding dues are based on a calendar year. All fees must accompany the application for membership. Refunds will not be issued. Payment is to be made only in U.S. dollars and must be through a U.S. bank or correspondent within the U.S. Payment may be made by check, money order or by credit card (American Express, MasterCard, or VISA). Bank checks must have complete numeric coding to avoid collection fees.

Dues are subject to change yearly and will be applied to the next calendar year for applications received on or after October 1.

Student Membership Dues

(U.S. \$, based on calendar year, includes AJEV online)

U.S. & Int'l\$50

Please check here if you wish to have your dues applied to the PRESENT calendar year, if submitting form after Oct. 1.

ASEV PRIVACY POLICY

The following use of contact information is a condition of ASEV membership: All current ASEV members are listed in the online membership directory. The directory is not available for sale. ASEV provides the contact information for each member to ASEV contractors such as for registration, newsletters, and other distributions to members for postal and/or electronic mailings as stipulated by ASEV.

Payment Information

Payments must be made payable to ASEV. Please mail the completed application and dues payment or credit card information to the following address:

American Society for Enology and Viticulture
P.O. Box 1855
Davis, CA 95617-1855 USA
FAX: (530) 753-3318 (ONLY FOR CREDIT CARD PAYMENTS)

Credit Card Number	Expiration Date	CVC Code	Amount (USD)
Applicant's Name	Printed Name on Card		
Cardholder's Address			
Authorized Signature		(authorizes the amount above to be charged to credit card)	

Paid Date	Amount	Paid By	Credit Card Paypal Check # _____
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