

2025 Membership & Renewal Form

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 312-379-9531 • cmulvaney@americanornithology.org

***required fields**

***FIRST NAME** _____ **MI** _____ ***LAST NAME** _____

Home Address

Work Address

***ADDRESS LINE 1** _____

ADDRESS LINE 2 _____

***CITY** _____

STATE _____

***ZIP / POSTAL CODE** _____

COUNTRY _____

List in member directory Yes No

Yes No

Primary address for AOS mail Yes No

Yes No

PHONE Home _____
 Work _____
 Cell _____

EMAIL(s) _____

TWITTER _____

INSTAGRAM _____

ORCID ID _____

MEMBERS LIVING OUTSIDE THE UNITED STATES, please write your address here in the correct format/language:

Any additional notes:

STUDENT INFORMATION

Please complete the following information regarding your current student status

***CURRENT STATUS – if your choice is not available, you must download a different form**

- | | |
|--|--|
| <input type="checkbox"/> Pre-College Student | <input type="checkbox"/> PhD Student |
| <input type="checkbox"/> Undergraduate Student | <input type="checkbox"/> Postdoc |
| <input type="checkbox"/> Masters Student | <input type="checkbox"/> Between Degree-Seeking Programs (student) |

INSTITUTION/UNIVERSITY NAME _____

FOR INDIVIDUALS BETWEEN DEGREE-SEEKING PROGRAMS

What stage of your academic path will you be entering next?

- Undergraduate program Masters program PhD or other graduate program

ANTICIPATED GRADUATION DATE

Individuals between degree programs should provide date of their most recent degree

MONTH: _____ YEAR: _____

ACADEMIC ADVISOR/SUPERVISOR

Individuals between degree-seeking programs should provide the information of their previous advisor.

NAME _____ EMAIL _____

DEMOGRAPHIC INFORMATION

AOS seeks to foster diversity and inclusion across the society and ornithology in general. We ask the following questions to help guide efforts in support of this goal. This information enables leadership and staff to better understand the membership, identify opportunities for improved offerings and services, and more effectively target communications. Information collected will only be used in aggregate analyses with no identifying information.

SELECT THE RANGE OF YEARS THAT INCLUDES YOUR YEAR OF BIRTH

- | | | | |
|--|--------------------------------------|--------------------------------------|---|
| <input type="checkbox"/> 2002 or later | <input type="checkbox"/> 1982 - 1991 | <input type="checkbox"/> 1962 – 1971 | <input type="checkbox"/> Prefer not to disclose |
| <input type="checkbox"/> 1992 - 2001 | <input type="checkbox"/> 1972 - 1981 | <input type="checkbox"/> Before 1962 | |

***GENDER IDENTITY THAT BEST DESCRIBES YOU**

- | | | |
|--------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Woman | <input type="checkbox"/> Agender | <input type="checkbox"/> Genderqueer or Gender Fluid |
| <input type="checkbox"/> Man | <input type="checkbox"/> Androgyne | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> Two Spirit | <input type="checkbox"/> Demigender | <input type="checkbox"/> Prefer to Self-describe: _____ |
| <input type="checkbox"/> Questioning | <input type="checkbox"/> Non-binary | |

Why we ask for this information:

The following helps AOS leaders and staff use the most respectful language when addressing you.

- *PREFERRED PRONOUNS**
- | | | |
|------------------------------|-------------------------------|---|
| <input type="checkbox"/> She | <input type="checkbox"/> They | <input type="checkbox"/> None of the above, I prefer: _____ |
| <input type="checkbox"/> He | <input type="checkbox"/> Ze | <input type="checkbox"/> Prefer not to say |
| | | <input type="checkbox"/> No pronoun preference |

COUNTRY OF ORIGIN (NATIONALITY) _____

HOW WOULD YOU DESCRIBE YOURSELF? PLEASE CHECK ALL THAT APPLY.

- | | | |
|-----------------------------------|---|--|
| <input type="checkbox"/> Asian | <input type="checkbox"/> Black | <input type="checkbox"/> Indigenous (please specify) |
| <input type="checkbox"/> Hispanic | <input type="checkbox"/> Native American or First Nation | <input type="checkbox"/> Other race, ethnicity, or origin (please specify) |
| <input type="checkbox"/> Latinx | <input type="checkbox"/> Middle Eastern or North African | |
| <input type="checkbox"/> White | <input type="checkbox"/> Native Hawaiian / Pacific Islander | Please specify here: _____ |

HIGHEST DEGREE HELD

- | | | |
|--|--|---|
| <input type="checkbox"/> High School Diploma | <input type="checkbox"/> Master's Degree | <input type="checkbox"/> Other Professional Graduate Degree |
| <input type="checkbox"/> Associate's Degree | <input type="checkbox"/> Doctoral Degree | <input type="checkbox"/> Not Applicable |
| <input type="checkbox"/> Bachelor's Degree | | |

DATE OF YOUR HIGHEST DEGREE MONTH _____ YEAR _____

PLEASE SELECT YOUR MEMBERSHIP LEVEL

All members have free access to the content of *Ornithology* and *Ornithological Applications* online. Access instructions can be found on the AOS website (www.americanornithology.org).

- | | |
|---|------------|
| <input type="checkbox"/> Student Membership | \$25.00 |
| <i>Available to any currently enrolled students (pre-college, undergraduate, graduate) or recent graduates who are between degree-seeking programs and intend to re-enter a degree program in the future.</i> | |
| Early Professional / Postdoc Membership | \$55.00 |
| <i>Available to individuals who have completed their terminal degree within the past five years.</i>
PLEASE FILL OUT THE REGULAR MEMBERSHIP FORM FOR A NON-STUDENT MEMBERSHIP | |
| Regular Membership | \$90.00 |
| <i>For individuals who do not choose or qualify for another membership category.</i>
PLEASE FILL OUT THE REGULAR MEMBERSHIP FORM FOR A NON-STUDENT MEMBERSHIP | |
| Family Membership – 2nd member | \$32.00 |
| <i>A second regular membership from the same household qualifies as a family member.</i>
PLEASE FILL OUT THE REGULAR MEMBERSHIP FORM FOR A NON-STUDENT MEMBERSHIP | |
| Emeritus / Retired Membership | \$32.00 |
| <i>Available to individuals who are retired and/or have been an AOS member (including AOU or COS) for 40 years or more. The society salutes your longstanding membership and steadfast commitment to the profession!</i>
PLEASE FILL OUT THE REGULAR MEMBERSHIP FORM FOR A NON-STUDENT MEMBERSHIP | |
| Life Membership | \$2,880.00 |
| <i>Payment may be made in a one-time payment or in four installments of \$720. Life memberships require no annual renewal, and the fee contributes directly to AOS's Council-designated General Endowment Fund.</i>
PLEASE FILL OUT THE REGULAR MEMBERSHIP FORM FOR A NON-STUDENT MEMBERSHIP | |

Contributing Membership.....\$500 | \$750 | \$1000 | Other (\$500 minimum)
For individuals wishing to provide a higher level of annual support to the Society (includes a 1-year membership in the AOS through Dec 31). Minimum Patron contribution \$500. Contributing members are recognized annually on our website. The contribution value of the membership is tax deductible to the full extent of the law.
PLEASE FILL OUT THE REGULAR MEMBERSHIP FORM FOR A NON-STUDENT MEMBERSHIP

Special Country Discount: Individuals from qualifying special countries receive a 75% discount on their annual membership fee. To be eligible, the individual's HOME address must be in a country with one of the following economic designations as determined by the World Bank: (1) low-income economy, (2) lower-middle income economy, or (3) upper-middle-income economy.

MEMBERSHIP DUES & OPTIONS

Membership Dues Amount (from above)	\$ _____	
Special Country Discount (if applicable)	(\$ _____)	Discount
<p>See criteria above for eligibility. If applicable, list a discount of \$18.75 (75% of \$25 membership fee) on the line to the right and subtract that from the total price down below.</p>		
Additional Donations		
Unrestricted Operating Fund	\$ _____	
Council-Designated General Endowment Fund	\$ _____	
COVID Relief Fund	\$ _____	
Total in U.S. Dollars	\$ _____	

JOIN OR RENEW ONLINE AT: AMERICANORNITHOLOGY.ORG

OR SEND THIS FORM WITH REMITTANCE TO: American Ornithological Society, 1400 S. Lake Shore Dr., Chicago, IL 60605-2827 USA. Make your check payable in US dollars to the American Ornithological Society. Checks must be drawn on a U.S. or Canadian bank. Please allow 3-4 weeks processing time for your account to be updated when renewing by mail. You may receive additional renewal reminders until your check has been processed.