



MEMBERSHIP FORM

Name: _____

Street Address: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

Phone: _____ E-Mail: _____

Institutional Affiliation: _____

Include in online directory?	Yes	No
<i>Music Theory Spectrum</i> format	Printed	Digital

MEMBERSHIP CATEGORY (choose one)

Student: \$40	\$50,000-\$74,999: \$105
Retired: \$50	\$75,000-\$99,999: \$135
\$0-\$34,999: \$40	\$100,000 and above: \$175
\$35,000-\$49,999: \$75	

PAYMENT INFORMATION

Membership payment: \$ _____

Donation: \$ _____

TOTAL PAYMENT: \$ _____

Payment by check or money order must be made in U.S. dollars, drawn on a U.S. Bank

Send completed form with payment to:

Society for Music Theory
Indiana University Jacobs School of Music
200 S Eagleson Avenue
Bloomington, IN 47405