Chinese Association for Science and Technology
Pittsburgh Chapter (CASTP)
Membership Application/Renewal Form

[Section 1]

Name (English) _____Name (Chinese) _____Gender_____

Mailing Address_____City_____

State_____ Zip_____ E-mail_____

Phone Number: (_____) _____ CASTP Membership ID (if available) _____

I join the association voluntarily and will adhere to the bylaw of CASTP.

Signature_____ **Date**_____

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[Section 2] This section is applicable for your spouse only.

Name (English) _____Name (Chinese) _____Gender_____

Mailing Address_____City_____

State_____ Zip_____ E-mail_____

Phone Number: (_____) _____ CASTP Membership ID (if available) _____

I join the association voluntarily and will adhere to the bylaw of CASTP.

Signature_____ **Date**_____

New Membership Fee:

__Student $10 (Section 1 only)
__Single member $20 (Section 1 only)
__Family member $25 (Section 1 and Section 2)

Annual Renew Membership Fee:

__Student $10
__Single member $20
__Family member $25

Please send this form and the membership fee **payable to CASTP** to:

CASTP, P.O.Box 539, Wexford, PA 15090-0539

Please contact Xia Li at **xialic05@yahoo.com** or Sumin Zhu at **smzhu2005@gmail.com** for further questions.

Welcome to CAST-P. Please visit us on www.castp.org

OFFICE USE ONLY CASTP ID: _____

Check No: _____ Amount: _____ Received by: _____ Date _____