



2026 ASNM MEMBERSHIP APPLICATION

Name: _____ Renewal: ☐ New: ☐

Second family member: _____ Each family member has a vote
in ASNM business affairs (max 2).

Address: _____

City: _____ State: _____ Zip code: _____

Email Address: _____

Home Phone: _____ Cell Phone: _____

Membership in any local Archeological/Historical Society? Please enter the Society name:

***Please check (v) the preferred membership level you wish to apply for,
and additional contributions you may add.***

Individual or Family, with Newsletter by Email \$45 ☐

Individual or Family, with Printed Newsletter by U.S. Mail..... \$50 ☐

Affiliate, with Newsletter by Email \$45 ☐

Affiliate, with Printed Newsletter by U.S. Mail..... \$50 ☐

Institution, with Printed Newsletter by U.S. Mail..... \$50 ☐

Contribution to ASNM Scholarship Fund: ... Amount \$ _____

Contribution to ASNM General Fund: Amount \$ _____

Contribution to ASNM Other Fund: Amount \$ _____

***Tax-deductible contributions
will be recognized in an email
or mailed letter of appreciation.***

Please send this form and payment of \$ _____ to: Archaeological Society of New Mexico
P.O. Box 3485
Albuquerque, NM 87190-3485

OR –

Renew or Join Online by going to the ASNM website <https://archaeologicalsocietynm.org/>