

Chinese Association for Science and Technology in California South CAST-CS Organization

Membership Application Form

First Name: _____ **Last Name:** _____

Cell Phone: _____ **Email:** _____

Home Address (the address your membership card to be mailed to):

Membership Type (select one):

☐ **Lifetime Membership \$200** ☐ **Family Membership (2 Cards) \$25/Year**

☐ **Single Membership \$20/Year** ☐ **Single Membership \$35/2Year**

(Provide two names for 'Family Membership' in order to receive two member cards)

Payment Option1:

1. Make the check payable to **CAST-CS**
2. Mail the check and the application form to:

Penny Li
427 S. Monterey
St., Apt#5
Alhambra, CA 91801

Payment Option2:

1. Email the application form to: castcs.org@gmail.com
2. Scan the QR code on the right and pay

Thank you for your interest in CAST-CS. If previously joined any of the chapters of CAST-USA and would like to join us, please mail in your valid membership card with them in order to receive a credit in the form of an extended expiration date on your new card.