**P O Box 7864, Princeton, NJ 08543**

**taabustw@gmail.com**

**Membership Application**

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| --- | --- | --- | --- | --- | --- |
| Last Name | **First Name** | **M.I./Nick Name** | | **Name in Mandarin** | |
| Education (circle all those applied) BS; MS; MBA; PHD; MD  Other: | | | | |  |
| Home address: | | | | | |
| Business address: | | | | | |
| Employer/Job Title: | | | | | |
| Business email: | | | Personal email: | | |
| Business phone:  (o):  (c): | | | Personal phone:  (h):  (c): | | |
| Membership fee:  Regular: $20/year  Student/Postdoc: S10/year  Permanent member: $200 | | | Make Check Payable to TAAB and mail to:  TAAB  PO. Box 7864  Princeton, NJ 08543 | | |

\*Donation to TAAB, a 501(c)(3) non-profit organization, is tax deductible. FEIN# 82-2287200.

\*Donation ≥ $500 automatically becomes a permanent member