



The Science Source for Food,  
Agricultural, and Environmental Issues

## EDUCATION PROGRAM MEMBERSHIP APPLICATION

*Please complete and return this form to join CAST's  
global effort to communicate science to academic leaders.*

Name of Educational Facility: \_\_\_\_\_

Address: \_\_\_\_\_

Address2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### Payment Information

\$3,000 annually for institutions with ag enrollments of 1,000 or less

\$5,000 annually for institutions with ag enrollments greater than 1,000

**NOTE:** If desired, the program fee may be split among entities using the program under the university's agricultural division (Agriculture College, Veterinary College, Extension Services, or Experiment Stations). If payment will be split, please provide appropriate instructions for invoicing.

Invoice Required

Check Enclosed: \$\_\_\_\_\_ (in U.S. dollars on a U.S. bank) – Payable to 'CAST'

Credit Card Payment: \$\_\_\_\_\_

VISA  Mastercard  Discover  American Express

\_\_\_\_\_  
Card Number Exp. Date

\_\_\_\_\_  
Name on the Card

\_\_\_\_\_  
Signature of Cardholder

**CAST is a qualified 501(c)(3) tax-exempt organization. Therefore, contributions may qualify as charitable contributions under IRS guidelines. You will receive a verification.**

This form may be returned to CAST via:

Mail **CAST**  
4420 West Lincoln Way  
Ames, IA 50014-3447

E-Mail **Melissa Sly at [msly@cast-science.org](mailto:msly@cast-science.org)**

For additional information on CAST or the Education Program, please contact:

Kent G. Schescke, Executive Vice President, at [kschescke@cast-science.org](mailto:kschescke@cast-science.org) or 515-292-2125 x 231.

\*The participating College must provide at least one contact name for a university staff member who will forward all electronic materials from CAST to the graduate students and faculty. CAST will electronically mail our *Friday Notes* 48 times a year to this designated staff member to be forwarded.

**Primary Representative:**

\_\_\_\_\_  
Name

\_\_\_\_\_  
E-mail (required to receive "Friday Notes")

\_\_\_\_\_  
Title

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address2

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Phone

**Secondary Representative:**

\_\_\_\_\_  
Name

\_\_\_\_\_  
E-mail (required to receive "Friday Notes")

\_\_\_\_\_  
Title

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address2

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Phone

**Administration/Billing contact if needed:**

\_\_\_\_\_  
Name

\_\_\_\_\_  
E-mail

\_\_\_\_\_  
Title

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address2

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Phone

Please visit [http://www.cast-science.org/membership/education\\_members/](http://www.cast-science.org/membership/education_members/) for more information.

**Thank you for supporting CAST!**