

EDUCATION PROGRAM MEMBERSHIP APPLICATION

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

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	 □ Invoice Required □ Check Enclosed: \$ (in U.S. dollars on a U.S. bank) – Payable □ Credit Card Payment: \$ □ VISA □ Mastercard □ Discover □ American Express 		
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I nis to	orm may be returned to CAST via:		
Mail	CAST 4420 West Lincoln \ Ames, IA 50014-344	•	
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E-Ma	4420 West Lincoln V Ames, IA 50014-344	47 ๋ at chamilton@cast-science.orดู	

*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 "Frida	ay Notes")		
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Please visit https://www.cast-science.org/education/cast-education-program/ for more information.

Thank you for supporting CAST!