



Professional Membership Gift Order Form

AMERICAN SOCIETY OF MECHANICAL ENGINEERS



Instructions: Please complete all three sections of this form and return with payment to ASME via email at customer-care@asme.org.

1

GIFT GIVER (PLEASE COMPLETE ALL APPLICABLE FIELDS)

First /Given Name _____ Last /Given Name _____ MI _____ Date _____

ASME Member # (if applicable) _____ Relationship to Recipient (optional) _____

Company _____ Primary Mailing Address ☐ Home ☐ Business

Address _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____ Phone Number (including area code) _____

Email Address _____

As soon as your order has been processed, we will send your gift membership recipient an email acknowledging your generosity!

2

GIFT RECIPIENT (ATTACH A SEPARATE SHEET FOR EACH GIFT RECIPIENT)

First /Given Name _____

Last /Given Name _____

MI _____ Gender ☐ M ☐ F

Birthdate (if known) _____ (MM/DD/YYYY)

Company _____

Primary Mailing Address ☐ Home ☐ Business

Address _____

City _____

State/Province _____ Zip/Postal Code _____

Country _____ Tel. (w/area code) _____

Email Address _____

Degree held (if known) 1. ☐ No Degree 2. ☐ B.A. 3. ☐ B.E. 4. ☐ B.S. 5. ☐ M.A.
6. ☐ M.S. 7. ☐ M.E. 8. ☐ Ph.D. 9. ☐ Sc.D. 10. ☐ Other (Describe) _____

Date Graduated (if known) _____ (MM)/_____(YY)

Years of Engineering Experience (if known) _____

Please indicate how many years it has been since your gift recipient graduated from College/University:

- ☐ Regular Member, 4+ years after graduation \$ 118.50 USD
☐ 0- 1 year after graduation \$ 47.25 USD
☐ 1- 2 years after graduation \$ 64.50 USD
☐ 2- 3 years after graduation \$ 82.50 USD
☐ 3- 4 years after graduation \$ 100.50 USD

Special Gift Membership Offer

Save 25% Today!

3

PAYMENT INFORMATION (PLEASE INDICATE AMOUNT AND METHOD. PAYMENT MUST ACCOMPANY FORM)

Gift Dues Payment Amount

Please enter amount indicated in section 2 above.

ASME Gift Membership Dues \$ _____

* Sales Tax \$ _____

Total \$ _____

Residents of South Dakota and Canada are required to calculate and add sales tax to their payment when paying by Check or Money Order.* Sales tax will be applied automatically when paying by Credit Card if applicable.

Gift Dues Payment Method

☐ Check (payable to ASME) ☐ AmEx ☐ Visa ☐ Mastercard ☐ Discover

Credit Card Number _____

Exp. Date (MM/YY) _____ Security Code (CSC/CVV2) _____

Cardholder Name _____

Cardholder Signature _____

Please return the completed form with payment to ASME via email at customer-care@asme.org

ASME 290 West Mount Pleasant Ave, Suite 1400
Livingston, NJ 07039
Telephone: 1-(800)843-2763 (U.S./Canada)/001-
(800)843-2763 (Mexico)/ (646)616-3100 (Outside North
America)
Email: customer-care@asme.org

Market Code: GIFTMEMPRO