



## American Kinesiology Association 2010 Annual Membership Form

### Member Information

Department Head/Chair: \_\_\_\_\_

Institution Name: \_\_\_\_\_

Department Name: \_\_\_\_\_

Address Line 1: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

Address Line 3: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone: \_\_\_\_ ( ) \_\_\_\_\_ Extension: \_\_\_\_\_

Fax: \_\_\_\_ ( ) \_\_\_\_\_

Department Head/Chair Email: \_\_\_\_\_

Department website address: \_\_\_\_\_

### Department Statistics (specific to Kinesiology):

# of faculty\*: \_\_\_\_ # of undergraduate majors: \_\_\_\_ # of Masters students: \_\_\_\_ # of doctoral students: \_\_\_\_

\*Please count only faculty who teach courses in kinesiology (and related titles like exercise science/sport science/human performance/physical education); also, count all teaching in this area by calculating "Full-Time Equivalent Faculty" using your institution's definition of that (include graduate teaching assistants in the count).

### Membership Categories (select one)

- \$900 Doctoral Degree Granting Department
- \$500 Master's Degree Granting Department
- \$300 Undergraduate Degrees and Programs

### Payment Method

Institutional Check in US\$  Visa  MasterCard  American Express  Purchase Order

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Name on Card: \_\_\_\_\_

Mail to: Association Membership  
Attn: Jackie Moore  
P.O. Box 5076  
Champaign, IL 61825-5076, USA  
Secure Fax: (217) 351-1549

Questions: Call Kim Scott at 1 (800) 747-4457 ext. 2234, (217) 403-7545, or email [kims@hkusa.com](mailto:kims@hkusa.com)