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<p>Email Address:</p>	<p>REFERRED BY: Tell us briefly how you heard of our organization and what inspired you to become a member. If an ARCE member referred you, please share their name so we can thank them.</p>
<p>ARCE e-News Letter: ___ Yes ___ No</p>	
<p>Phone Number:</p>	
<p>JARCE Option: ___ YES ___ NO</p>	

<p>___ Cartouche - \$1,000 ___ 2-Year option - \$1,800 ___ Family option - \$1,200</p>	<p>___ Lotus - \$155 ___ 2 Year option - \$279 ___ Family option - \$186</p>	<p>Make checks payable to: American Research Center in Egypt</p> <p>Credit Card: <input type="checkbox"/> Visa <input type="checkbox"/> Master Card <input type="checkbox"/> Discover <input type="checkbox"/> Amex</p> <p>Card Number: _____</p> <p>Exp. Date (mm/yy): _____</p> <p>Billing Address (If different from preferred address above):</p> <p>_____</p> <p>_____</p> <p>Signature: _____</p>
<p>___ Scribe- \$500 ___ 2-Year option- \$900 ___ Family option - \$600</p>	<p>___ Papyrus- \$250 ___ 2-Year option- \$450 ___ Family option - \$300</p>	
<p>___ Regular - \$75 ___ 2-Year option - \$135 ___ Family option - \$90</p>	<p>___ Retired - \$60 ___ 2-Year option - \$108 ___ Family option - \$72</p>	
<p>___ Student- \$45 ___ 2-Year option- \$81</p>	<p>Selecting the JARCE option will decrease your charitable giving tax deduction by \$45 per IRS regulations</p>	

ARCE Chapter Affiliation: Please indicate which chapter you wish to affiliate with.

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- Detroit, MI New Orleans, LA

I do not wish to affiliate with a chapter at this time

****A portion of your membership dues will go to the chapter selected to support their local programs.****

Send completed forms and payment to:

The American Research Center in Egypt
C/o Membership
909 North Washington Street, Suite 320
Alexandria, Virginia 22314

You may call 703.721.3470 with any questions regarding membership or to join by telephone