

# AJA Individual Membership Application

Please make extra copies of this form if necessary

**For less than 15¢ a day you can take advantage of being a member of  
the only Association dedicated to supporting those who work in our nation's jails**

Please print/type

Name: \_\_\_\_\_ Title/Rank: \_\_\_\_\_

Home Address: \_\_\_\_\_ Apt/Suite/FI # \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ 9-digit Zip: \_\_\_\_\_ - \_\_\_\_\_

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

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

Place of Employment: \_\_\_\_\_

Address: \_\_\_\_\_ Suite/FI # \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ 9-digit Zip: \_\_\_\_\_ - \_\_\_\_\_

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

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

Send Mail to:  Home  Work

Check enclosed (U.S. currency) payable to American Jail Association.

Visa  MasterCard  American Express

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

Expiration Date: \_\_\_\_\_ Security #: \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_

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

Billing Address Zip Code: \_\_\_\_\_

Mail payment and completed  
application to:

Sandy Rudy, Membership Mgr  
American Jail Association  
1135 Professional Court  
Hagerstown, MD 21740

And/Or fax 301-790-2941

And/or e-mail information to  
[sandyr@aja.org](mailto:sandyr@aja.org)

Or visit our website at  
[www.aja.org](http://www.aja.org)

Your AJA Ambassador Name/Title: \_\_\_\_\_

Organization: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

## Individual Membership – Annual Dues

US \$48.00

Canada \$54.00

Foreign \$66.00

All Canadian and foreign memberships must be payable in U.S. currency drawn on U.S. banks.