



THE SOCIETY OF NAVAL ARCHITECTS AND MARINE ENGINEERS

Update your contact information to receive:

- **SNAME Graduation Gift and**
- **Associate Membership Status at the Student Member Rate**

Name

SNAME Membership #

Post School Address

Post School E-mail

City/State/Zip

Yes, I graduate from:

Phone #

_____ on _____
School Date

*** Mobile Phone #**

Please send me my SNAME Graduation Gift

I am not graduating in 2009

I will be attending graduate school
Keep me on as a Student Member

Graduation Date:

_____ on _____
School Date

Fill out and return the form -

Email to: aanderson@sname.org

Fax to: (201) 798-0475

Mail to:

SNAME

601 Pavonia Avenue, Suite 400

Jersey City, NJ 07306

ATTN: Alana Anderson

Once we receive your completed form, you will receive your SNAME graduation gift and qualify for your first year as an Associate Member at the \$35.00 rate.

Congratulations! And thank you for your continued support!