I hereby request admission to join the American Studies Leipzig Alumni Association (ASLAA) e.V. Last Name, First Name Profession Graduating Year or Name of Institution (and its Representative(s)) Address: Street Zipcode, City Phone E-Mail O Student/Unemployed O Employed O Institution For students and unemployed members we suggest a member fee of 12¢ per year, for employed members at least 24¢ per year and for institutions at least 50¢ per year. Members are expected to pay their fee no later than four weeks after being admitted to the ASLAA e.V. The fee then has to be paid until January 15th of each year. I would like to pay an admission donation of		A S L A A AMERICAN STUDIES LEIPZIG ALUMNI ASSOCIATION	
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Registered with the Leinzig County Court, VR 6418	E-Mail: info@aslaa.de	Institut für Amerikanistik, Universität Leipzig, Beethovenstr. 15, 04107 Lei pzig	