

American Coaster Enthusiasts Membership Renewal

Save time and postage! Renew online today at www.AmericanCoasterEnthusiasts.org

Please type or print neatly. Complete both pages of this form.

Mailing/Directory Information Primary Contact Name: Please indicate each members' privacy preferences on the back of this form. Once your renewal has been processed, you may update your privacy preferences via our web site. City: Membership Costs State: Zip/Postal Code: Country: Enter total membership dues from reverse side \$ Country: Enter foreign postage cost from reverse side \$ Billing Address \$ Must match address of payment account ACE Archives Fund \$ Address: ACE Preservation Fund \$ City: State: State: Zip/Postal Code: Country: Total Payment Due \$ Daytime telephone number: Payment Information Evening telephone number: Total Payment Due \$ Email address: Payment Information Return form to: Total payment must accompany completed application. [] Check or money order enclosed made payable to American Coaster Enthusiasts (Must be in U.S. dollars and drawn on a U.S. bank) P.O. Box \$40261 Name of person writing check: [] MasterCard [] Visa [] Discover Name as it appears on card: Credit Card #: Expiration Date: CVV Code:								
Address: City:	Mailing/Directory Information	Privacy Preferences						
Address: City: State: Zip/Postal Code: Country: Telephone: Billing Address Must match address of payment account Address: City: City: City: Donations (Optional) ACE Archives Fund Donations assist with acquiring and cataloging of historic roller coaster and amusement park items and establishing exhibits and archival displays. ACE Preservation Fund Donations to this fund will be forwarded to NRCMA. Total Payment Due Suptime telephone number: Evening telephone number: Email address: Return form to: American Coaster Enthusiasts P.O. Box 540261 Grand Prairie, TX 75054-0261 For questions, please contact us at: Phone: (469) 278-6223 Postations our web site. Membership Costs Enter total membership dues from reverse side \$ Enter total membership dues from reverse side \$ Enter total membership dues from reverse side \$ Enter total members side Enter total members side For questions, please contact us at: Postate: Zip/Postal Code: State: Zip/Postal Code: Ace Archives Fund S Donations (Optional) ACE Archives Fund S Donations assist with acquiring and cataloging of historic roller coaster and amusement park items and establishing exhibits and archival displays. ACE Preservation Fund S Donations (Optional) ACE Archives Fund S Donations (Optional) ACE Archives Fund S Donations to this fund will be forwarded to NRCMA. Total Payment Due S Donations to this fund will be forwarded to NRCMA. Total Payment Information Total Payment Information Total payment must accompany completed application. [] Check or money order enclosed made payable to American Coaster Enthusiasts (Must be in U.S. dollars and drawn on a U.S. bank) Name of person writing check: [] MasterCard [] Visa [] Discover Name as it appears on card: Credit Card #: Expiration Date: CVV Code:	Primary Contact Name:	· · · ·						
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The payment of membership dues by, for, or on behalf of members releases and holds harmless the American Coaster Enthusiasts Worldwide, Inc. and its officers, directors, executive committee members and representatives from any and all actions and liabilities related to its publications, activities, and actions. Donations to the ACE Preservation Fund, ACE Archives Fund and NRCMA as well as a portion of membership dues may be tax deductible for U.S. members (consult your tax professional for tax advice). Annual membership dues include \$32 for a one-year subscription to RollerCoaster! (\$16 for a six-month subscription for trial memberships. Associate memberships do not include a RollerCoaster! subscription). A \$25 fee will be assessed for any returned check. Violations of ACE's Code of Conduct may result in membership suspension or termination without refund. Please allow up to four weeks for processing and shipping.

Complete the section for the membership type that matches your membership requirements and budget and then copy the membership dues and postage costs to the previous page. If you currently have a trial membership, you must convert to a different membership type when renewing your membership. If you are adding new members to an individual, couple or family membership, enter "NEW" as the member number.

INDIVIDUAL, COUPLE CORPORATE OR	CORPORATE OR individuals, two for couple or families; six printed issues of ACE News and four printed issues of RollerCoaster! per year; each	VIEWABLE IN	MEMBERSHIP LENGTH (circle one)			
		DIRECTORY	One	Two	Three	
IVIEIVIDENSHIP	regional, national and international events at member rates.		year	years	years	
First member Name:	Member #	Name Y N Address Y N	¢c.	\$120	\$175	
Birth year: E	mail:	Phone # Y N Email Y N	\$65	\$120	\$1/5	
Second member at same address		Name Y N				
Name:	Member #	Address Y N	744 ¢30	Add \$35	Add \$50	
Birth year: E	mail:	Phone # Y N Email Y N	Add \$20			
Third member at same address		Name V N				
Name:	Member #	Name Y N Address Y N	Add \$5	V 44 Ç10	Add \$15	
Birth year: E	mail:	Phone # Y N Email Y N	Add \$5	Add \$10		
Fourth member at same address		Name Y N				
Name:	Member #	Address Y N	Add \$5	Add \$10	Add \$15	
Birth year: E	mail:	Phone # Y N Email Y N				
Fifth member at same address		Name Y N				
Name:	Member #	Address Y N	Add \$5	Add \$10	Add \$15	
Birth year: E	mail:	Phone # Y N Email Y N	·			
Sixth member at same address		Name Y N				
Name:	Member #	Address Y N	Add \$5	Add \$10	Add \$15	
Birth year: E	mail:	Phone # Y N Email Y N	riad ys	7100 710	7.00 710	
If necessary, list names a	nd email addresses of additional members on		Add	Add	Add	
additional sheet. Enter th	ne count of those members to calculate their dues.		\$5 x=	\$10 x =	\$15 x =	
TOTAL MEMBERSHIP DU	JES (total of all previous lines)					
POSTAGE (circle one)						
U.S.A.			\$0	\$0	\$0	
Mexico/Canada			\$15	\$30	\$45	
All other countries			\$40	\$80	\$120	
			1		1	

CORPORATE MEMBERSHIP	The corporate member rate is structured the same as the individual or family memberships listed above. Fill out the corporate information below for a corporate membership, and list the contact names in the section above.	PUBLISH II ACE DIRECTOR		See pricing above	
	Member #				
Corporation:		Company Y	N		
		Contact Y	N		
IAAPA number		Address Y	N		
		Phone # Y	N		
State/Country of incorpor	ation	Email Y	N		

ASSOCIATE MEMBERSHIP	One-year voting membership (one ballot); <i>RollerCoaster!</i> not included ; six online issues of <i>ACE News</i> ; member will receive a membership card and may register for ACE regional, national and international events at member rates.	PUBLISH IN ACE DIRECTORY		ACE		MEMBERSHIP DUES	POSTAGE
Name:	Member #	Name Address	Y N Y N	625	- 1-		
Birth year:	Email::	Phone # Email	Y N Y N	\$35	n/a		