

# KARL JASPERS SOCIETY OF NORTH AMERICA

Founded, Boston, Massachusetts, 1980

Membership includes free participation in KJSNA research projects and events, such as giving conference papers at the KJSNA Annual Meetings or at KJSNA events in conjunction with the World Congress of Philosophy. Papers presented at any of the KJSNA venues are eligible for consideration to be published in *Existenz* ([www.existenz.us](http://www.existenz.us)). Membership is due at the beginning of each calendar year, renewal is optional.

ANNUAL DUES ARE \$ 25.00

LIFE MEMBERSHIP IS \$ 200.00

New members only: Subscriptions received prior to August 31st will count as payment for the current year. Payments received past September 1st will count for the following calendar year.

PAYMENT WITH CHECK \$ 25.00

Mail payment to  
KJSNA Secretary-Treasurer  
P.O. Box 150551  
San Rafael, CA 94915

**CHECKS ARE PAYABLE TO KJSNA**  
only checks issued by a USA bank

OR VIA BANK TRANSFER \$ 25.00

**Zelle Pay** (fee-free direct Bank Transfer) send payment to [helmut.wautischer@sonoma.edu](mailto:helmut.wautischer@sonoma.edu)

or

**Popmoney** (\$ 0.95 bank fee) send payment to [helmut.wautischer@sonoma.edu](mailto:helmut.wautischer@sonoma.edu)

OR WITH CREDIT CARD \$ 27.50

Online payment at <https://karljaspers.us/membership.html>

## Make a Donation

Your gift enables KJSNA to continue advancing scholarship and to act as the voice for Jaspers research in the United States. *The KJSNA is a non-profit 501C(3) organization and your gift may be tax deductible according to law. Please consult your personal tax advisor for appropriate deductibility.*

I wish this gift to be anonymous

I wish to have my name listed on your website as a donor

KJSNA Associate \$ 100 - \$ 249

KJSNA Partner \$ 500 - \$ 999

KJSNA Friend \$ 250 - \$ 499

KJSNA Patron \$ 1000+

⌘.....⌘.....⌘.....⌘.....

KJSNA MEMBERSHIP FOR (PLEASE CIRCLE)      2022                      2023                      2024                      2025

Name: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Affiliation: \_\_\_\_\_ Amount included / transferred \_\_\_\_\_