



subscription order form

SUBSCRIPTIONS	Check one: <input type="checkbox"/> Individual <input type="checkbox"/> Institution	PRICE
Name of Journal _____		

GIFT SUBSCRIPTIONS	Check one: <input type="checkbox"/> Individual <input type="checkbox"/> Institution	PRICE
Name of Journal _____		

Subtotal	
Residents of CT, DC, GA, & MD add applicable sales tax <i>(No tax on memberships)</i>	
Orders shipped to Canada add 6% GST (#124004946RT)	
Postage outside the U.S. <i>(See individual journal pages for amounts.)</i>	
GRAND TOTAL	

MAIL SUBSCRIPTIONS TO:

Name _____

Address 1 _____

Address 2 _____
(To ensure delivery, a street address MUST be provided. This includes university addresses.)

City/State/Zip+4 _____

Daytime Phone No. *(In case we have questions about your order.)* _____

Email Address _____
(Required for electronic subscriptions.)

MAIL GIFT SUBSCRIPTIONS TO: (Sender: provide your address above.)

Send renewal notices to: Me Recipient

Name _____

Address _____
(To ensure delivery, a street address MUST be provided. This includes university addresses.)

City/State/Zip+4 _____

Message on gift card _____

(Cards will be mailed within three weeks.)

Daytime Phone No. *(In case we have questions about your order.)* _____

Email Address _____
(Required for electronic subscriptions.)

METHOD OF PAYMENT

Check or money order drawn on a U.S. bank in U.S. dollars for \$_____ enclosed, payable to The Johns Hopkins University Press.

Charge my: Amex Discover MasterCard Visa Exp. Date _____

Account No. - - -

Signature _____

Bill me **(institutions only)** P.O. # _____

Orders for books must be placed separately with the Book Division; see page 39 or visit www.press.jhu.edu/books/.

order form