



ISMB Membership Application

General Information:

Name: _____ Degree(s): _____
Position: _____ Male/Female: _____

www.ismb.org

Mailing Information:

Institution: _____
Street address: _____
City & State: _____
Country: _____

Contact Information:

Office phone: _____ Lab phone: _____ Cell/mobile: _____
E-mail: _____ Second e-mail: _____ Home phone: _____
URL: _____

Research Fields:

Keyword 1: _____ Keyword 2: _____
Keyword 3: _____ Keyword 4: _____

Type of Membership (please check one)

- Regular member **without** personal subscription to Matrix Biology: EUR 50 / US\$ 64
- Regular member with **online subscription** to Matrix Biology: EUR 128 / US\$ 161
- Regular member with **print and online subscription** to Matrix Biology: EUR 186 / US\$ 233
- Junior or senior member (students, post-docs, retired): EUR 20 / US\$ 26
- Junior or senior member with **online subscription** to Matrix Biology: EUR 98 / US\$ 123
- Junior or senior member with **print and online subscription** to Matrix Biology: EUR 156 / US\$ 195

Send completed form to David Hulmes, IBCP UMR 5305, 7 passage du Vercors, 69367 LYON cedex 7, France or send a scan as an e-mail attachment to: david.hulmes@ibcp.fr.

Payment

For online payment by credit card or using a PayPal account, go to www.ismb.org

For payment by bank transfer, please use the following information to transfer payment to the ISMB account:

Account name: ISMB Bank name: Crédit Mutuel Bank address: CCM Lyon Brotteaux Massena, CS 10011, 36 cours Vitton, 69452 LYON cedex 06, France.

Account details: IBAN: FR7610278073200002039760107, BIC/SWIFT: CMCIFR2A

Signature _____

Date: (day/month/year) _____