



## 2017 Membership Application

### Member Information

Salutation									
Full Name			Street Address						
Affiliation									
Department			City						
Email			State/Province		Postal Code				
Phone			Country		This is my: <input type="checkbox"/> Home Address <input type="checkbox"/> Work Address				
Primary Research Interests									
Primary Reason for Joining <input type="checkbox"/> To Attend Annual Symposium <input type="checkbox"/> Submit Protein Society Award Nomination <input type="checkbox"/> Access <i>Protein Science</i> Journal <input type="checkbox"/> Network with Protein Society community <input type="checkbox"/> Other (please explain)									
Sector		Dues Info		1-Year		2-Year		5-Year	
<input type="checkbox"/> Education <input type="checkbox"/> Industry <input type="checkbox"/> Non-Profit <input type="checkbox"/> Government <input type="checkbox"/> Other		<b>Full</b> <b>Early-Career</b> <b>Graduate</b> <b>Undergraduate</b> <b>Emeritus</b> <b>Lab Staff</b>		<b>Early*</b> \$150 \$80 \$40 \$20 \$20 \$40	<b>Standard</b> \$200 \$100 \$50 \$25 \$25 \$50	<b>Early*</b> \$285 \$150 \$75 \$40 \$40 \$75	<b>Standard</b> \$380 \$180 \$90 \$50 \$50 \$90	<b>Early*</b> \$700 \$375   \$90 \$180	<b>Standard</b> \$950 \$475   \$115 \$230
		*Early fees are available ONLY between November 1 and December 31.							
Payment Information									
Membership Dues \$ _____ Contribute to: \$ _____ Finn Wold Travel Award Fund \$ _____ Kaiser Award Endowment Fund \$ _____ Mentoring Committee Fund \$ _____ Education Committee Fund \$ _____ Subtotal \$ _____ \$25 Wire Transfers Only \$ _____  <b>Total \$ _____</b>				Credit Card <input type="checkbox"/> American Express <input type="checkbox"/> Visa <input type="checkbox"/> Master Card <input type="checkbox"/> Discover  <input type="checkbox"/> Check (payable to The Protein Society) U.S. currency only <input type="checkbox"/> Drawn on US Bank Federal Tax ID: 94-3019570			Account Number  Name on Card  Expiration      Billing Postal Code  Signature		

Return this statement with your payment via mail, fax 844.377.6834, or email to:

The Protein Society | PO Box 9397 | Glendale, CA 91226 | USA | [staff@proteinsociety.org](mailto:staff@proteinsociety.org)