

Membership Application



Name of Applicant Mr. Miss Ms. Mrs. _____
LAST NAME SUFFIX FIRST NAME MIDDLE INITIAL

Address

WORK ADDRESS
Current Institution _____ Present Position _____

STREET ADDRESS

CITY

STATE

ZIP CODE

COUNTRY

HOME ADDRESS

STREET ADDRESS

CITY

STATE

ZIP CODE

COUNTRY

Contact Information

Please check one: Home Work

Telephone # _____

Primary email _____ Secondary email _____

Demographic Information

Date of Birth _____ Gender (please check one): Male Female
MONTH / DATE / YEAR

Ethnicity/Race: African American American Indian Asian/Pacific Islander White Hispanic Other _____

Bibliographic History

Articles and Publications (Regular Membership Only) _____

(You may attach CV for articles and publications)

Primary Area of Research

Please check all that apply:

- Bioenergetics Cell Biology Computational Biology Developmental Biology DNA and Chromosomes Enzymology Gene Regulation
 Genomics and Proteomics Glycobiology and Extracellular Matrices Immunology Lipids Membrane Biology Metabolism
 Microbiology Molecular Bases of Disease Molecular Biophysics Neurobiology Plant Biology Protein Structure and Folding
 Protein Synthesis and Degradation RNA Signal Transduction Other: _____

Would you be interested in becoming involved in or learning more about any of these areas within ASBMB?

- Accreditation ASBMB Today, member magazine Meetings Minority Affairs/Diversity Professional Development and Careers
 Public Affairs Public Outreach and Science Communication Undergraduate Education

All member applications can also be completed online at www.asbmb.org/join.

Membership Dues (Calendar Year)

Please choose one category:

Regular Member CHECK ONE: 1 YEAR: \$140 2 YEARS: \$250 

Available to any individual who holds a doctoral degree and who has published, since receipt of the doctoral degree, at least one paper in a peer-reviewed journal devoted to biochemistry and molecular biology.

Associate Member CHECK ONE: 1 YEAR: \$70 2 YEARS: \$120 

Available to any postdoctoral fellow (or equivalent).

_____ EXPECTED DEGREE(S) _____ DATE TO BE AWARDED

Affiliate Member \$45/YEAR

Available to those who are not eligible for Regular or Associate membership; such as educators at the college or high school level who do not have a PhD or have not published.

Graduate Member \$25/YEAR

Available to any graduate student.

_____ EXPECTED DEGREE(S) _____ DATE TO BE AWARDED

Undergraduate Student Member \$10/YEAR

Available to any student working toward completion of a bachelor's degree and is enrolled as an undergraduate.

_____ EXPECTED DEGREE(S) _____ DATE TO BE AWARDED

TOTAL \$:

Payment Information

Payments should be made to: **ASBMB**.

Mail completed application with payment in USD to:

ASBMB Membership Department, 11200 Rockville Pike, Suite 302, Rockville, MD 20852-3110

Or fax to: **301-881-2080**.

American Express Mastercard VISA

NAME ON CARD _____

CARD NUMBER _____ EXP. DATE _____

AUTHORIZATION SIGNATURE _____

Your application will be reviewed by the Executive Director of ASBMB. Upon certification for eligibility, you will receive a packet welcoming you into the Society, including activation instructions for your member journal subscriptions.

Contact the ASBMB membership department for any questions at: 240-283-6604 or membership@asbmb.org.



American Society for Biochemistry and Molecular Biology
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Phone: 240-283-6604 • Fax: 301-881-2080
Website: www.asbmb.org Email: membership@asbmb.org

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