

1 YOUR DETAILS

Please write clearly using block capital letters.

TITLE	SURNAME
FIRST NAMES	
DEPARTMENT	
INSTITUTION	
ADDRESS	
TELEPHONE	
FAX	
EMAIL	

SEB Membership runs from 1 October - 30 September

2 YOUR MEMBERSHIP

Please tick required membership, then calculate Grand Total.

SEB MEMBERSHIP FEES

- Full Membership (1 year) =£56
- Full Membership (5 years) =£225
- 15 Year Membership =£590
- Student Membership (1 year) =£10
- Student Membership (5 years) =£50
- Early Career Scientist* Membership (1 year) =£25

To be eligible for ECS rate you must be in the first three years of your first post-doctoral position and have obtained the signature of your head of department (see part 6)

- Full Membership (Eastern Europe and Africa) =£10
- Retired / Emeritus Membership =£10

SEB TOTAL

I wish to join FESPB £

(Federation of European Societies of Plant Biology)

- Full Membership =£10
- Student Membership =£7

ICCPB Contribution. All Members =£8

Voluntary contribution towards the International Congress for Comparative Physiology and Biochemistry

GRAND TOTAL £

3 GROUPS

Which groups do you wish to be a member of? Please tick at least one.

- | | | |
|----------------------------------------------------|---------------------------------------------------------|----------------------------------------------------------------|
| <input type="checkbox"/> Animal Respiration | <input type="checkbox"/> Cell Signalling | <input type="checkbox"/> Plant Membrane Transport |
| <input type="checkbox"/> Comparative Endocrinology | <input type="checkbox"/> Plant Development Physiology | <input type="checkbox"/> Energetics & Environmental Physiology |
| <input type="checkbox"/> Thermobiology | <input type="checkbox"/> Plant Environmental Physiology | <input type="checkbox"/> Education |
| <input type="checkbox"/> Conservation Physiology | <input type="checkbox"/> Biomechanics | <input type="checkbox"/> Public Affairs |
| <input type="checkbox"/> Plant Metabolism | <input type="checkbox"/> Cell Cycles | <input type="checkbox"/> Career Development |
| <input type="checkbox"/> Osmoregulation | <input type="checkbox"/> Intercellular Co-ordination | |
| <input type="checkbox"/> Neurobiology | <input type="checkbox"/> Plant Molecular Biology | |

4 PAYMENT

Pay by cheque, money order or credit card.

- I enclose a cheque / money order for £ drawn upon a UK bank and made payable to *The Society for Experimental Biology*
 - Please debit my Visa / Mastercard / American Express / Eurocard / Maestro
- Card Number Expiry Date /
- Security Code (last 3 digits on the security strip)
- Issue No (Switch/Maestro only) Start Date (Switch/Maestro only) /
- Amount £ Signature
- I wish to pay for future renewal by Direct Debit. Please send me a Direct Debit mandate (UK accounts only)

5 PROPOSAL IN SUPPORT OF YOUR APPLICATION

The Society requires that applicants for membership should obtain the support of two SEB members. You may find it inconvenient because of your locality to secure the signature of two members. If so, please inform us of your status and qualifications, together with a CV, and officers of the Society will then normally act as proposer and seconder.

We wish to propose as a suitable candidate for membership of the SEB.

- 1 Name of Member Proposing
Signature / Email
- 2 Name of Member Proposing
Signature / Email

6 STUDENT/ EARLY-CAREER SCIENTIST MEMBERSHIP ONLY

Your Head of Department should complete the following.

is a Student / Early Career Scientist in my department and (if a student) will terminate their studies by:

Signature of Head of Department:

7 WHY ARE YOU JOINING THE SEB?

- | | |
|----------------------------------------------------------------------------------------------|------------------------------------------------------------------------|
| <input type="checkbox"/> Access to Grants | <input type="checkbox"/> Belonging to SEB Community |
| <input type="checkbox"/> Reduced registration fees to SEB Conferences | <input type="checkbox"/> At the recommendation of |
| <input type="checkbox"/> Other (please specify: <input style="width: 150px;" type="text"/>) | an existing member (name: <input style="width: 150px;" type="text"/>) |

Send to: SEB, 3 The Carronades, New Road, Southampton SO14 0AA