

## American Society for Photobiology

## **Membership Form**

The American Society for Photobiology promotes research in photobiology, integration of different photobiology disciplines, dissemination of photobiology knowledge, and provides information on photobiological aspects of national and international issues.

☐ New Membership	
☐ Renewal Member Number:	

First Name:	Last Name:				
Organization:					
Address:				<del></del>	
City:		State:	Postal Code:		
Country:					
Phone:		FAX:			
Email:					
2024 MEMBERSHIP FEES (JANUARY - DECEM	BER)				
Single-Year Membership Types:		Multiple-Year Membership Types:			
☐ Full Member (Online Only)	\$ 145	☐ 2 Years Full	☐ 2 Years Full Member (Online Only)		
☐ Associate Member (Online Only)	\$ 30	☐ 2 Years Full	Member (Online & Print)	\$ 356	
Copy of Student ID or Letter from Mentor required  ☐ Emeritus Member (Online Only)	\$ 40		Member (Online Only)	\$ 493	
Must be retired from active professional employment and member of ASP for 15+ years	<b>V</b> 40	☐ 4 Years Full	Member (Online & Print)	\$ 653	
☐ Retired Member (Online Only)  Must be retired from active professional employment	\$ 70	☐ Add one HARD COPY Subscription  Discount does not apply to Subscription		\$ 40	
PAYMENT INFORMATION  ☐ Check: Payable to "ASP" and drawn on a United S  ☐ Credit Card: ☐ VISA ☐ MasterCard ☐ Ame	erican Express 🔲				
Card #					
Cardholder Name:					
Cardholder Billing Address:					
City:		_ State:	Postal Code:		
Signature:					

Refunds are not issued for purchase of American Society for Photobiology membership; membership is canceled when the membership term expires or if an individual requests that the membership be terminated.

Federal Tax ID: 23-7179512

Payment Amount \$\_\_

**Return payment and form to:** American Society for Photobiology 950 Herndon Parkway, Suite 450, Herndon, VA 20170