

MNN Membership Offline Payment Form

Select Membership Type:

Regular Membership – All Inclusive Lab	\$120/year
Regular Membership (Academic faculty, medical and industry professionals)	\$60/year
Associate Member (Postdocs, Research Associates, Technicians, emeritus faculty)	\$30/year
Student Membership (Graduate & undergraduate students)	\$15/year

First Name:	Last Name:	
Organization:		Position:
Address:		
Tel #:	Email:	
Supervisor:		
*If All Inclusive Lab, please lis	t all lab members:	

FOAP #:

Amount:

Authorization to charge FOAP:

Signature

EMAIL COMPLETED FORM TO: kjorund@sbrc.ca