



INSTRUCTIONS

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MAIL OR FAX YOUR APPLICATION TO: IEEE Engineering in Medicine & Biology Society, 445 Hoes Lane, Piscataway, NJ 08854 USA • Tel: 1-732-465-6460 • Fax: 1-732-465-6435 • E-Mail: emb-exec@ieee.org

SECTION A

SEND ALL MAIL TO: [] Home address [] University address

IF YOU ARE NOW OR EVER WERE A MEMBER OF IEEE, PLEASE FURNISH:

NAME AND ADDRESS (as it should appear on IEEE mailings):

If last name entered is not family name (surname), please circle first letter of family name to insure proper alphabetic sorting in member database and directories. Do not exceed 40 characters or spaces per line. Please abbreviate as necessary.

Title First/Given Name Middle Initial Last/Surname/Family

Home Address

City Province/State Country Postal Code

DATE OF BIRTH: Day / Month / Year [] MALE [] FEMALE HOME TELEPHONE: E-MAIL:

SECTION B

1. UNIVERSITY INFORMATION

University
School or College
Street Address
City State/Country Postal Code
E-Mail Address

2. EDUCATION (Highest level now completing)

This information is required to qualify for student membership. Complete in full.

Title of Degree Expected Expected Graduation Date (Mo/Yr)
Degree Program (check one)
Undergraduate: [] 2 or 3 year [] 4 or 5 year
Graduate: [] Master's [] Ph.D./Doctoral
Area of Degree: [] Elec. Eng./Electronics [] Computer Eng./Science
[] Medical Physics [] Biomed Eng.
[] Biology [] Medical
[] Chemistry [] Other
Do you now hold a degree? [] Yes [] No
If yes, complete:
Title of Degree Date Received
Full University Name City/State/Province/Country

3. ACADEMIC ENDORSER

I endorse this application for student membership in the IEEE and certify the degree information as given to be correct and complete.

Student Counselor's Signature or IEEE Branch Counselor Print Name
I hereby make application for IEEE membership and agree to be governed by IEEE's Constitution, Bylaws and Code of Ethics. I authorize release of any information related to this application to determine my qualifications for membership.
[] I am taking at least 50% of a full time academic program
Student's Signature Day/Month/Year

4. STUDENT MEMBERSHIP FEES

Table with columns: [All prices quoted in US\$], Full Year (8/16/2010 - 8/15/2011), Half Year (3/1/2011 - 8/15/2011). Rows include Graduate Student, Undergraduate Student, IEEE and EMBS Membership* (United States, Canada/GST, Canada/HST, Outside U.S. and Canada), and EMBS Membership.

*Any EMB student attending an EMB conference will receive a discount of \$25.00 USD toward membership renewal + does not include applicable tax

5. EMBS PUBLICATION OFFERINGS

Table with columns: Freq, Product #, Full Year, Air Freight. Includes 2011 EMBS Student Member Subscription Rate, IEEE PULSE, IEEE EMBS Electronic Resource, Biomedical Engineering, IEEE Reviews In Print, Biomedical Engineering, IEEE Trans On Print, Information Technology in Biomedicine, IEEE Trans On Print, Neural Systems & Rehabilitation Engineering, IEEE Trans On Print, Other EMB Journals and Transactions available at a Student Discount to Members (NanoBioscience, Medical Imaging, Computational Biology and Bioinformatics, Biomedical Circuits and Systems).

SECTION C

LOCAL CURRENCY PAYMENT: Please refer to the Payment Information Section of this brochure for local currency accepted.

IEEE & EMBS Dues: \$
EMBS Publication Offerings: \$
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Canadian Tax: \$
Total Amount Paid: \$

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Credit Card No. Exp. Date
Signature Cardholder's Zip Code (US Only)