

ISGP Membership Application & JGP Application Form

Please indicate your choice (Remember to include your payment in USD):

- Annual Membership to the International Society for Gravitational Physiology (\$25.00)
(This includes a subscription to the *Journal of Gravitational Physiology*)
- Annual Subscription to the *Journal of Gravitational Physiology* (\$32.00)

Name:

Last: _____ First: _____ Middle Initial: _____

Title: _____ (DR, PhD, Dsc, MD, Mr, Mrs, etc.) Position: _____

Signature: _____

Address:

Department: _____

Organization: _____

Address: _____

City: _____ State: _____

Postal Code: _____ Country: _____

Telecommunication:

Phone (Voice): _____

Phone (Fax): _____

Email: _____

- I wish to sponsor a membership. I am including \$25.00 for each membership. (If you are providing sponsorship for a specific individual, please indicate their name & address).

Name & Address: _____

- I wish to apply for a sponsored membership. (Please attach a letter describing your position, qualifications and the reason for this request).