**IGF Society Membership & Payment Form**

Instructions

1. Download and save this form
2. Complete all the information
3. Pay via Pay Pal (see link on society webpage)
4. Email completed membership form to: IGFsociety@gmail.com



**Name:**

**Institution:**

**Address:**

**Telephone:**

**Email:**

**Membership Type:**

**Student ($15) ………………………………Previous IGF society member yes/no**

**Full ($45) ……………………………….Previous IGF society member yes/no**

**Lab ($100) ………………………………..Previous IGF society member yes/no**

**Signature: ……………………………………………………….**

**For Lab Memberships Only**

PI Name …………………………………………….. Previous society member yes/no

Trainee 1 Name …………………………….………………….. Previous society member yes/no

Trainee 2 Name ……………………………………….……….. Previous society member yes/no

Trainee 3 Name ………………………………………….…….. Previous society member yes/no

Trainee 4 Name ………………………………………….…….. Previous society member yes/no

Trainee 5 Name ………………………………………….…….. Previous society member yes/no

Trainee 6 Name ………………………………………….…….. Previous society member yes/no

Trainee 7 Name ………………………………………….…….. Previous society member yes/no

Trainee 7 Name ………………………………………….…….. Previous society member yes/no

Trainee 9 Name ………………………………………….…….. Previous society member yes/no

Trainee 10 Name ………………………………………….……..Previous society member yes/no