**SOMED MEMBERSHIP APPLICATION FORM**

**SOMED membership is open to all who are interested in microbial ecology and related topics from bench to clinical applications and technological aspects.**

☐ Ms  ☐ Mr  ☐ Prof  ☐ Dr

First name:  Surname:

Dept/Laboratory/Center:

Institution/Company:

Position/Status:

Street/P.O. Box:

Postal code:  City:  State:  Country:

Phone:  Fax:  E-mail:

*I authorize the inclusion of my data in the SOMED Membership Directory as above detailed.*

Date:  Signature:

**Annual fees**

☐ Regular membership: EUR 40  ☐ Corporate membership: EUR 400
(or USD 55)  (or USD 550)

☐ 2-years membership: Eur 80  ☐ 2-years membership: EUR 800
(or USD 110)  (or USD 1600)

☐ Student membership: EUR 20  ☐ Supporting membership: EUR 1000
(or USD 25)  (or USD 1350)

(Please add student status certification)

**Please fill in below the total fees paid and the corresponding years**

**Total fees:** .......................................................  **Years:** ..........................................................

Please send your payment to the SOMED Treasurer, Dr. Kourkoutas Ioannis, by:

☐ Bank transfer to:  KOURKOUTAS IOANNIS
  PIRAEUS BANK, 227 Dimokratias St.,
  Alexandroupolis, GR-68100, Greece

For EUR: IBAN GR34 0172 5150 0055 1507 5218 913 - BIC: PIRBGRAA

For USD: IBAN GR15 0172 5150 0055 1507 5218 964 - BIC: PIRBGRAA

☐ By Cheque to:  KOURKOUTAS IOANNIS (please **DO NOT** mention on the check SOMED treasurer, Dr, Professor, University or other Affiliations)

Please send the cheque by registered mail to:  Kourkoutas Ioannis
  P.O. Box 1608, Palagia,
  Alexandroupolis, GR-68100, Greece

Please send by e-mail (ikourkou@mbg.duth.gr) this form to Dr. Kourkoutas Ioannis