**APPLICATION FORM FOR THE MEMBERSHIP OF**

**SOCIETY OF GEOMAGNETISM AND EARTH, PLANETARY AND SPACE SCIENCES (SGEPSS)**

*Please fill and return this form by mail to*

SGEPSS Desk c/o Proactive Inc.

3th Floor, Sannomiya Century Bldg., 83 Kyomachi, Chuo-ku, Kobe 650-0034, Japan

TEL: +81-78-332-3703 FAX: +81-78-332-2506 Email: sgepss@pac.ne.jp

I apply for a Regular (living in Japan) / Regular (living outside Japan) / Student / Supporting membership of Society of Geomagnetism and Earth, Planetary and Space

Sciences from (year).

Signature Date

*The membership will be renewed automatically.*

Applicant’s Information

Name (Dr. Prof. Mr. Ms. )

Surname Given name Middle name

Sex Male / Female / Other / Not preferred to answer

*Chinese character’s name if you have*

Affiliation:

Address:

Telephone: Fax:

E-mail:

Home Address:

Telephone: Fax:

\*Mailing Address: □ Affiliation □ Home (*Please check with a tick.*)

\*Date of birth (month / date (optional) / year)

\*Special field of interest

\*Names of two SGEPSS members who endorse my enrollment.