



The RNA Society

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WEBSITE: www.rnasociety.org

MEMBERSHIP APPLICATION:

New Renewal

(Membership year is January – December)

Today's Date:

Name: _____
 First Middle Last

Organization: _____

Address: _____

City _____ State: _____ Zip: _____

Country: _____

Telephone: _____

Telefax: _____

E-mail address: _____

Additional Information:

MALE FEMALE Birth Year: _____ (optional)

PLEASE RETURN THIS APPLICATION WITH YOUR REMITTANCE

U.S. Currency ONLY (Checks to be drawn on a U.S. bank with MICR Encoded Number at bottom)

Make checks payable to: The RNA Society

For Wire Transfers, add \$20 to your total payment to cover bank fees.

For Credit Card payments, see below

**RNA Society Federal Tax ID:
84-1222776**

MEMBERSHIP DUES

| | One Year | | Two Year | | Three Year | |
|-------------------|---|------------------------------------|------------------------------------|-----------------------------------|-----------------------------------|------------------------------------|
| | Online Only | Print & Online | Online Only | Print & Online | Online Only | Print & Online |
| Full Member | <input type="checkbox"/> \$ 154.00 | <input type="checkbox"/> \$ 183.00 | <input type="checkbox"/> \$ 283.00 | <input type="checkbox"/> \$341.00 | <input type="checkbox"/> \$412.00 | <input type="checkbox"/> \$ 499.00 |
| Student/Post Doc* | <input type="checkbox"/> \$ 36.00 | <input type="checkbox"/> \$ 89.00 | <input type="checkbox"/> \$ 65.00 | <input type="checkbox"/> \$171.00 | <input type="checkbox"/> \$ 95.00 | <input type="checkbox"/> \$ 254.00 |
| Emeritus** | <input type="checkbox"/> \$ 36.00 | | <input type="checkbox"/> \$ 65.00 | | <input type="checkbox"/> \$ 95.00 | |
| Lifetime | <input type="checkbox"/> \$ 2000 for a lifetime membership that includes online access to RNA journal only. | | | | | |

Total Payment: _____

* Students and Post Docs must complete box on lower portion of form

** Emeritus Member are individual scientists who are no longer employed—either through retirement or job loss—but who otherwise qualify for Regular Membership, are eligible to become Emeritus members. Evidence for such standing may be provided by endorsement of an individual's departmental chair, or by providing a written statement attesting to such status. Emeritus Members are not eligible to be elected to office and receive online access to RNA journal only.

CREDIT CARD INFORMATION:

American Express VISA Master Card

Card Number _____ Expiration Date: _____ CVC _____

Name on Card _____

Authorized Signature _____

STUDENT POST DOC

Institution _____ Department _____

Degree _____ Field _____ Pending Completion Date _____

Advisor Name: _____ Advisor Email _____

Signature of applicant's major research advisor: _____