

# Membership Application

## MEMBERSHIP INFORMATION



**INTERNATIONAL  
SOCIETY FOR  
ENVIRONMENTAL  
EPIDEMIOLOGY**

**A Professional  
Society  
of  
Environmental  
Epidemiologists**

### Mail or FAX form with payment to:

International Society for  
Environmental  
Epidemiology

c/o Infinity Conference  
Group  
1035 Sterling Road,  
Suite 202  
Herndon, VA 20170  
Phone: 703-925-0178  
1-844-369-4121  
Fax: 703-925-9453

E-mail:  
secretariat@iseepi.org

www.iseepi.org

Prefix: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Last Name: \_\_\_\_\_ Suffix: \_\_\_\_\_

Email: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_ State: \_\_\_\_\_

Country: \_\_\_\_\_ Country of Origin: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Title: \_\_\_\_\_

Department: \_\_\_\_\_

Organization: \_\_\_\_\_

### Organization Type:

- Federal Government       Industry       Private Consulting  
 Research Institute       State/Local Government       University  
 Other: \_\_\_\_\_

### Chapter you belong to:

- Africa       Asia & Western Pacific       Eastern Mediterranean       Europe  
 Latin America & the Caribbean       North America

### Age Range:

- 34 & Under       35-50       51-64       65 & Up

### Gender:

- Male       Female       Trans Male       Trans Female       Gender Queer  
 Gender Non-Conforming       Other       Choose Not to Answer

Do you wish to be included in our membership directory?  Yes  No

## MEMBERSHIP OPTIONS AND RATES

Please check your membership category (All options include an on-line subscription to *Epidemiology*)

**Full 1-year Membership\* - \$250.00** \*Note – Full Membership includes a \$20 contribution to support travel awards to the ISEE conference for students from low- and middle-income countries or training workshops in these areas. Please check the box below to indicate how you would like to apply your \$20 donation.

- Africa Chapter     Asia and Western Pacific Chapter     Both Student Travel Awards & Training Workshop  
 Eastern Mediterranean Chapter     Europe Chapter     Latin America and Caribbean Chapter  
 North American Chapter     Student Travel Awards     Training Workshops in Underserved Regions/Areas

**Standard 1-year Membership - \$230.00**

**Developing Country 1-Year Membership - US \$60.00** (Country status based on World Bank macroeconomic indicators)

**Student 1-year Membership --US \$60.00** (Please enclose copy of current student ID)

**Emeritus 1-Year Membership -- US \$95.00** (Please provide statement verifying that you are not professionally active or earning a professional salary. Please email Secretariat for the Emeritus Request Form.)

**Subsidized/Early Career 1 Year Membership -- US\$155.00** (Membership subsidy eligibility is available to members who meet one of the following criteria: Please check one)

- Temporary Financial Hardship**     **New Researcher** (less than 5 years of experience from terminal degree)

**Printed version of Epidemiology**, ISEE members may purchase a yearly subscription for the print version of Epidemiology for an **\$84** reduced member rate.

Address for Journal Mailing (if different from above)

Street Address: \_\_\_\_\_ Apt Number: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

Country: \_\_\_\_\_

### PAYMENT OPTIONS (Membership cannot be processed without payment)

Federal ID# 25-1569662

Total to be charged \$ \_\_\_\_\_

Mail with check or money order in USD drawn on a U.S. bank and payable to **ISEE**

Mail or fax with credit card information—(NOTE: To avoid a duplicate credit card charge, **DO NOT** send this form by **BOTH** fax and mail. Please either fax **OR** mail form)

Visa     Master Card     American Express

Cardholder Name: (If different from above) \_\_\_\_\_

CARD NUMBER: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_ / \_\_\_\_\_ CVC \_\_\_\_\_  
(MONTH)    (YEAR)

Authorizing Signature: \_\_\_\_\_

**International bank wire transfer.** Wire transfer FEES from the originating and intermediary banks **MUST BE PAID BY THE APPLICANT.** Please send this application form under separate cover and contact the ISEE Secretariat for wire transfer information.



**RESEARCH AREAS**

Please indicate up to five areas of research interest in each category.

Circle the professional organization(s) of which you are now a member:

- 1. ACE      2. SER      3. IEA      4. APHA      5. ISES      6. SOEH      7. Other \_\_\_\_\_

**HEALTH ENDPOINTS:**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Cancer              | <input type="checkbox"/> Cardiovascular                 | <input type="checkbox"/> Children's environmental health |
| <input type="checkbox"/> Infectious diseases | <input type="checkbox"/> Medically unexplained symptoms | <input type="checkbox"/> Neurologic                      |
| <input type="checkbox"/> Other disease       | <input type="checkbox"/> Other disease Specify: _____   | <input type="checkbox"/> Reproductive Health             |
| <input type="checkbox"/> Respiratory         |   |  |

**EXPOSURES:**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Air quality    | <input type="checkbox"/> Biological exposures            | <input type="checkbox"/> Built environment                     |
| <input type="checkbox"/> Climate Change | <input type="checkbox"/> Food and nutrition              | <input type="checkbox"/> Hazardous waste                       |
| <input type="checkbox"/> Heavy metals   | <input type="checkbox"/> Ionizing radiation              | <input type="checkbox"/> Multi-pollutant/Multi-Media Exposures |
| <input type="checkbox"/> Noise          | <input type="checkbox"/> Non-ionizing radiation          | <input type="checkbox"/> Occupation                            |
| <input type="checkbox"/> Other          | <input type="checkbox"/> Other exposure (specify): _____ | <input type="checkbox"/> Pharmaceuticals                       |
| <input type="checkbox"/> Pesticides     | <input type="checkbox"/> Solvents                        | <input type="checkbox"/> Tobacco Smoke                         |

**METHODS AND OTHER:**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Communication               | <input type="checkbox"/> Complex systems            | <input type="checkbox"/> Environmental Inequity     |
| <input type="checkbox"/> Ethics                      | <input type="checkbox"/> Exposure assessment        | <input type="checkbox"/> Field or community studies |
| <input type="checkbox"/> International collaboration | <input type="checkbox"/> Methodology/Study design   | <input type="checkbox"/> Modeling                   |
| <input type="checkbox"/> Molecular epidemiology      | <input type="checkbox"/> Other                      | <input type="checkbox"/> Other (specify): _____     |
| <input type="checkbox"/> Policy and planning         | <input type="checkbox"/> Risk assessment            | <input type="checkbox"/> Spatial statistics         |
| <input type="checkbox"/> Statistical Analysis        | <input type="checkbox"/> Susceptible subpopulations | <input type="checkbox"/> Toxicology                 |