



# Association of Scientists of Indian Origin

## NEW MEMBERSHIP APPLICATION

Name: \_\_\_\_\_

Affiliation: \_\_\_\_\_

Address \_\_\_\_\_  
 \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Area Code: \_\_\_\_\_ Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Membership: \$15 for all members (full, student or post-doc)

**(PLEASE NOTE: You can become an ASIO member even if you are not an SOT member; also, the first Specialty Section/Special Interest group membership is free for students/post-docs, who are also SOT members)**

Please check the most appropriate responses:

SOT Member	Highest Degree Attained		Type of Affiliation
<input type="checkbox"/> Yes	<input type="checkbox"/> A.S.	<input type="checkbox"/> M.P.H.	<input type="checkbox"/> Academia
<input type="checkbox"/> No	<input type="checkbox"/> B.A.	<input type="checkbox"/> M.S.	<input type="checkbox"/> Consulting
	<input type="checkbox"/> B.S.	<input type="checkbox"/> M.A.	<input type="checkbox"/> Contract Lab
	<input type="checkbox"/> D.V.M.	<input type="checkbox"/> Ph.D.	<input type="checkbox"/> Government
	<input type="checkbox"/> D.V.M./Ph.D.	<input type="checkbox"/> Sc.D.	<input type="checkbox"/> Industry- Chemical/Petroleum
	<input type="checkbox"/> M.D.	<input type="checkbox"/> V.M.D.	<input type="checkbox"/> Industry- Pharmaceutical
	<input type="checkbox"/> M.D./Ph.D.	<input type="checkbox"/> Other	<input type="checkbox"/> Industry- Other
	<input type="checkbox"/> Other- _____		<input type="checkbox"/> Other- _____

Please complete the information above and send with a check payable to "ASIO-SOT". The ASIO-SOT will review your application, and you will be notified within 30 days. Those not accepted will receive a full refund.

Current ASIO members: Please do not use this form since your renewal dues are billed annually through SOT.

Payment Type: Money Order \_\_\_\_\_ Check \_\_\_\_\_ Credit Card \_\_\_\_\_

Credit Card # \_\_\_\_\_ Exp date \_\_\_\_\_

Name on Card \_\_\_\_\_

Signature \_\_\_\_\_

Send to: Ashley Black, Society of Toxicology 11190 Sunrise Valley Drive, Suite 300 Reston, VA 20191

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