



**Entomological Society of Alberta
Application for Membership**



To apply for new membership in the Entomological Society of Alberta,
please mail a completed copy of this application form and membership fee to the Society.

Indicate a prefix: Dr. ___ Mr. ___ Mrs. ___ Ms. ___

Name: _____

Postal address: _____

Telephone numbers: work _____ , home _____

Fax number: _____ E-mail address: _____

Website: _____

Institution affiliation (if applicable and/or not indicated above):

Indicate a category of membership desired: ___ Student (\$10.00 per year membership fee)
 ___ Regular (\$20.00 per year membership fee)

Brief statement of your background and entomological interest:

Please mail this form and membership fee payment (cheque or money order payable to the "Entomological Society of Alberta") to the Treasurer of the Society: Kimberly Rondeau, Department of Biological Sciences, CW 405 Biological Sciences Centre, University of Alberta, Edmonton, Alberta, T6G 2E9.

Once membership is granted, information provided on this application form may be published on the ESA website, in the Proceedings of the ESA and possibly in other types of communications at the discretion of the Board. If you wish to keep certain information unpublished, indicate below which information you do not want the ESA to publish:

prefix___ , name___ , postal address___ , work telephone number___ , home telephone number ___ ,
 fax number___ , e-mail address___ , website___ , institution affiliation___ , background / interest ___.

For more information about the ESA, visit our website: www.entsocalberta.ca