

The Asian Society of Natural Products

- Membership Application Form -

Dr. Assis. Prof. Assoc. Prof. Prof. Mr. Mrs. Miss Ms

Name	Last :		First :	
	Birthday : MM / DD / YYYY		Gender : <input type="checkbox"/> Male <input type="checkbox"/> Female	
Mailing Address <input type="checkbox"/> Home <input type="checkbox"/> Work	Address			
	Institute		Country	
	Tel		Fax	
	Mobile		E-mail	
<p>MEMBERSHIP CATEGORY (yearly membership due)</p> <p><input type="checkbox"/> Regular Member (\$50) <input type="checkbox"/> Graduate Student Member (\$30) <input type="checkbox"/> Industry/ Institution Member (\$500)</p> <p>Payment to : ASNP Bank : WOORI Bank Jungang Univ. Ansung Sub_Br SWIFT code : HVBKRXSEXXX Account Number : 1005-503-121225</p> <p>Please attach you CV if available. Credit Card Payment: Contact ASNP office after submission of Membership Application Form</p>				
Education	Period	School	Major	Degree
Career	Period	Place / Duty		Position
MEMBER AGREEMENT				
<p>- ASNP membership due is non-refundable and non-transferable. Your ASNP membership will be valid for one year beginning from the date your membership application is received.</p> <p>- I understand the conditions of ASNP membership and attest to the accuracy of the information on the application.</p> <p>- I oath to abide by the ASNP code of ethics. * ASNP Code of Ethics available from web.</p>				
Signature of Applicant : _____			Date : _____	

Your personal information is safe. ASNP will handle the personal information of members according to the corresponding Korean regulation.