

**APPLICATION FOR MEMBERSHIP  
in the  
HELMINTHOLOGICAL SOCIETY OF  
WASHINGTON**

(Please print legibly or type)

This is a (1) New Membership, (2) Student Membership, or (3) Renewal Application (circle one)

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

Date of Birth \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Present Position: \_\_\_\_\_

Name of Institution: \_\_\_\_\_

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

FAX: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Highest Degree Earned and the Year Received: \_\_\_\_\_

Are You a Student? If so, for what degree and where? \_\_\_\_\_

\_\_\_\_\_

Field(s) of interest: \_\_\_\_\_

\_\_\_\_\_

If you are experienced in your field, would you consent to serve as a reviewer for manuscripts submitted for publication in *Comparative Parasitology*? If so, what specific subject area(s) do you feel most qualified to review? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of Applicant and Date:

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Signature of Major Professor (for Student Applicants):

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Mail the completed application along with a check **made out to the Helminthological Society of Washington** (from a US bank) or money order (in US currency) for the first year's dues (U.S. \$32 for domestic members, \$20 if not receiving the journal, \$16 for students, \$35 for foreign members) to:

Ashleigh Smythe  
Helminthological Society of Washington  
Corresponding Secretary-Treasurer  
Department of Biology  
301B Maury-Brooke Hall  
Virginia Military Institute  
Lexington, VA 24450

If you wish to pay by credit card (Visa and Master Card only), please complete the following:

Credit Card: \_\_\_ Visa® \_\_\_ Master Card®

Expiration Date: \_\_\_/\_\_\_

Credit Card Number: \_\_\_\_\_

Signature of Card Holder: \_\_\_\_\_ Amount Charged: US\$ \_\_\_\_\_

Printed Name Exactly as Stated on Card: \_\_\_\_\_