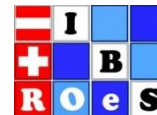


International Biometric Society
Austro-Swiss Region / Region Österreich-Schweiz (ROeS)



Application for membership / Bewerbung um Mitgliedschaft / Requête en vue de devenir membre

Last Name / Nachname / Nom: _____

First Name / Vorname / Prénom: _____

Title / Titel / Titre: _____

Organization / Organisation / Organisation: _____

Address / Adresse / Adresse:

Telephone / Telefon / Téléphone: _____

e-mail: _____

(required for online access to journals and e-mail announcements)

Membership category / Kategorie bei Mitgliedschaft / Catégorie de membre

Regular member (EUR/CHF 75)

voting privileges, right to hold elective office,
online access to *JABES*, *Biometrics*, and *Biometrical Journal*
 optional: *Biometrics* hardcopy (additional charge, EUR/CHF 10)

Senior retiree member (EUR/CHF 30)

voting privileges, right to hold elective office,
online access to *JABES*, *Biometrics*, and *Biometrical Journal*

A Senior retiree member must have been a Regular member for at least 10 years and is no longer gainfully employed prior to transferring to Senior retiree member status.

optional: *Biometrics* hardcopy (additional charge, EUR/CHF 10)

Student member (free membership)

online access to *JABES* and *Biometrics*

Name of major professor (please print):

Associate member (free membership)

applicable for IBS members of other regions, please specify region: _____

The following options are applicable for all membership categories:

Newsletters & announcements by e-mail No Yes

Signature of applicant / Unterschrift des Bewerbers / Signature du requerant

Date / Datum / Date

Please send the signed application form to the ROeS treasurer:

Mr. Dominik Heinzmann

e-mail: treasurer@ibs-roes.org

An invoice with information of payment methods will be sent to you afterwards.