## 2018 Sustaining Associate Membership



## Complete form and return to:

Society for Neuroscience 1121 14th Street NW, Suite 1010 Washington, DC 20005

**Member Information** 

The address information below will be used for your website, Neuroscience Quarterly, and SfN annual meeting publications listing.  Company Name	
Email Address	Web Address
Sustaining Associate ID # (for renewing orga	nizations)
Primary Contact Information	
The representative listed below will be the prim	ary contact receiving membership information including SfN publications and renewal information.
Contact Name	
Contact Address	
Business Phone (area code)	Fax (area code)
Email Address	
Complimentary Registration R	ecipient Information (if known)
The representative listed below will receive com	•
Recipient Name	
Recipient Address	
Business Phone (area code)	Fax (area code)

\*Membership is valid for the 2018 calendar year.

Desired Class of Membership\*

Information on SAM benefits can be found at sfn.org/Member-Center/Member-Benefits/Sustaining-Associate-Members

☐ Silver | \$5,290

☐ Nonprofit | \$2,900

## Payment (check one)

☐ Platinum | \$10,555

**Email Address** 

- ☐ Check or money order in U.S. dollars on a U.S. bank made payable to "Society for Neuroscience" or "SfN"
- ☐ To submit payment with a credit card, please contact member services at 202-962-4911

☐ Gold | \$7,140