Resource-restricted Country APS Membership Application

First Name | Middle Name | Last Name | Suffix

Primary Email Address | Secondary Email Address

Institution/Organization | Department/Division

INSTITUTION ADDRESS

Institution Street Address

Institution City | State/Province | Country | Zip/Postal Code

Telephone (country code–city code–number)

HOME ADDRESS (OPTIONAL)

Home Street Address

City | State/Province | Country | Zip/Postal Code

Preferred Mailing Address: ☐ Institution ☐ Home

Do you want your name, city, country, email address and affiliations included in the member directory? ☐ Yes ☐ No

PROFILE DETAILS

Date of Birth: _____ / _____ / _____ *(MM / DD / YYYY)*

Gender: ☐ Male ☐ Female ☐ Prefer Not to Answer

Degree received or anticipated degree: _____

The date you received (or expect to receive) your highest level degree: _____ / _____ / _____ *(MM / DD / YYYY)*

Job Function: _____

Job Title: _____

Primary Section Affiliation: _____

Members must affiliate with a primary section. For more details and to review section details, visit www.physiology.org/sections.

What would you consider yourself? _____

What is your primary role? _____

Employment Sector: _____

Where did you hear about APS? _____

Email your completed application to members@physiology.org or fax it to +01.240.366.1138.

Questions? Call +01.301.634.7171 or email members@physiology.org.

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MEMBERSHIP DUES

Select the membership type and tier you are applying for. Reference countries list below to determine tier.

TIER	REGULAR MEMBER	TRAINEE MEMBER	STUDENT MEMBER
Tier 3	☐ $100	☐ $20	☐ $20
Tier 2	☐ $50	☐ $20	☐ $20
Tier 1	☐ $20	☐ $20	☐ $20

For membership type details and criteria, visit physiology.org/join.

PAYMENT INFORMATION

Payment Method: ☐ VISA ☐ MASTERCARD ☐ AMERICAN EXPRESS

Cardholder Name _____ Card Number _____

Expiration Date (MM/YY) _____/_____ CVV _____

Signature _____

By typing your name in the signature field, you authorize your credit card to be charged for the total dues payment selected above. If you prefer to make payment via wire transfer, please email members@physiology.org for APS' bank details.

TIER 3

Albania
Algeria
Argentina
Armenia
Azerbaijan
Belarus
Belize
Bosnia and Herzegovina
Botswana
Brazil
Cabo Verde
China
Colombia
Cuba
Dominica
Dominican Republic
Ecuador
El Savador
Equatorial Guinea
Fiji
Gabon
Georgia
Grenada
Guatemala
Indonesia
Iran, Islamic Rep.
Iraq
Jamaica
Kazakhstan
Kosovo
Libya
Malaysia
Maldives
Marshall Islands
Mauritius
Mexico
Moldova
Mongolia
Montenegro
North Macedonia
Paraguay
Peru
Samoa
Serbia
South Africa
St. Lucia
St. Vincent and the Grenadines
Suriname
Thailand
Tonga
Turkey
Turkmenistan
Tuvalu
Ukraine

TIER 2

Angola
Bangladesh
Benin
Bhutan
Bolivia
Cambodia
Cameroon
Comoros
Congo, Rep.
Djibouti
Egypt, Arab Rep.
Eswatini
Ghana
Guinea
Haiti
Honduras
India
Jordan
Kenya
Kiribati
Kyrgyz Republic
Lao PDR
Lebanon
Lesotho
Mauritania
Micronesia, Fed. Sts.
Morocco
Myanmar
Namibia
Nepal
Nicaragua
Nigeria
Pakistan
Papua New Guinea
Philippines
São Tomé and Principe
Senegal
Solomon Islands
Sri Lanka
Tajikistan
Tanzania
Timor-Leste
Tunisia
Uzbekistan
Vanuatu
Vietnam
West Bank and Gaza
Zambia
Zimbabwe

TIER 1

Afghanistan
Burkina Faso
Burundi
Central African Republic
Chad
Congo, Dem. Rep
Eritrea
Gambia, The
Guinea-Bissau
Korea, Dem. People's Rep
Liberia
Madagascar
Malawi
Mali
Mozambique
Niger
Rwanda
Sierra Leone
Somalia
South Sudan
Sudan
Syrian Arab Republic
Togo
Uganda
Yemen, Rep.

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