

**APPLICATION FOR MEMBERSHIP**  
**THE INTERNATIONAL SOCIETY FOR SKIING SAFETY (ISSS)**

Name            Prof/Dr/Mr/Mrs/Ms/Miss Family name .....

                    Other names .....

Address            .....

                    City.....Zip Code.....

                    Country.....

Telephone        Country code (.....) Area Code (.....).....

Fax                Country code (.....) Area Code (.....).....

E-mail            .....

Profession        .....Date.....

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|                         |           |                        |
|-------------------------|-----------|------------------------|
| Individual subscription | USD125.00 |                        |
| Initiation fee          | USD 25.00 | Amount paid : USD..... |
| Company subscription    | USD200.00 |                        |
| Initiation fee          | USD 25.00 | Amount paid: USD.....  |

Registrants in any of the international conferences of ski trauma and skiing safety of ISSS are not required to pay the initiation fee. Conference attended .....

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**PLEASE REMIT DIRECTLY TO:**

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