



Contact Information

Name _____ Affiliation _____
 Address _____
 City _____ State/Province _____ ZIP/PC _____ Country _____
 Email _____ Phone _____ Fax _____

General Information

Work Environment Business or Industry Government Academia
Primary Field of Interest Testing/methods Mechanisms Computer/SAR Risk Assessment Other

Please indicate below your **Primary Research Areas** in each category (two per category).

System	Endpoint	Organism	Rationale	Health Connection
<input type="checkbox"/> <i>in vitro</i> (acellular)	<input type="checkbox"/> DNA damage/adducts	<input type="checkbox"/> bacteria	<input type="checkbox"/> molecular mechanisms	<input type="checkbox"/> cancer
<input type="checkbox"/> cells in culture	<input type="checkbox"/> DNA repair	<input type="checkbox"/> yeast	<input type="checkbox"/> toxicity	<input type="checkbox"/> genetic disease
<input type="checkbox"/> whole animals	<input type="checkbox"/> mutations	<input type="checkbox"/> plants	<input type="checkbox"/> risk assessment	<input type="checkbox"/> aging
<input type="checkbox"/> human tissues	<input type="checkbox"/> chromosomal damage	<input type="checkbox"/> drosophila	<input type="checkbox"/> testing	<input type="checkbox"/> development
<input type="checkbox"/> populations	<input type="checkbox"/> cancer/cellular transformation	<input type="checkbox"/> rodents	<input type="checkbox"/> sentinel species	<input type="checkbox"/> genomics
<input type="checkbox"/> math/computer modeling	<input type="checkbox"/> heritable diseases	<input type="checkbox"/> humans	<input type="checkbox"/> epidemiology	<input type="checkbox"/> other
<input type="checkbox"/> new technology	<input type="checkbox"/> other	<input type="checkbox"/> cells in culture	<input type="checkbox"/> other	
<input type="checkbox"/> other		<input type="checkbox"/> transgenic		
		<input type="checkbox"/> other		

Dues & Contributions

	USA	Canada (incl. GS tax)	Other (incl. Postage)	Please Enter Amount
2019 Membership Renewal <i>Includes only electronic access to Environmental and Molecular Mutagenesis</i>	\$US 149.00	\$US 149.00	\$US 149.00	_____
Subscription Options for <i>Environmental and Molecular Mutagenesis</i>				
Electronic Access Only <i>(Included with renewal)</i>	\$US 0.00	\$US 0.00	\$US 0.00	_____
2018 Print Subscription <i>(Includes electronic access)</i>	\$US 30.00	\$US 35.00	\$US 50.00	_____

Contributions

Hollaender Fund _____
 EMGS General Fund _____
 Memorial Funds _____
\$US TOTAL _____

Method of Payment

Check written on funds in a US Bank Bank wire (\$10.00 fee. Please contact the business office for further specifics of the transfer.)
 Visa MasterCard AMEX Discover
 Credit Card No. _____ Exp. (mm/yy) _____ CCV _____ Signature _____