



# Winnipeg Chapter of the Society for Neuroscience

## Membership Application and Renewal Form 2006 or 2006-2008

\* = Required Fields.

Please FILL OUT and PRINT

<b>Name: *</b>			<b>Telephone:*</b>	
<b>Position Title:</b>			<b>E-mail:*</b>	
<b>Organization / Department</b>	<b>Mailing Address:*</b>			
<b>URL:</b>	<b>Note</b> Please copy the Web-address of your current 'Professional Profile' web page in your web browser and paste it here.			
New application Renewal	<b>If this is a New Application, please provide the following information:</b>			
<b>Research Expertise - Key words (10-30 words)</b>				
<b>Suggestions for Grass Lecturers</b>				
<b>If you are a trainee, please complete:</b>	<b>Name of Supervisor:</b>	<b>Department Affiliation:</b>	<b>Degree program:</b> MSc PhD PDF	
<b>Category of membership*:</b>	<b>Regular Membership</b> (Faculty, clinical and research associates)	<b>1 year</b> (Jan-Dec) <b>\$15.00</b>	<b>3 years</b> <b>\$45.00</b>	<b>I wish a receipt:</b> Yes No
	<b>Graduate Student / PDF Membership</b> (Trainees)	<b>\$ 5.00</b>	<b>\$15.00</b>	
	<b>Other</b> (Non-academics, technicians and other interested)	<b>\$ 5.00</b>	<b>\$15.00</b>	
<b>Please make cheques payable to:</b> "Winnipeg Chapter Society for Neuroscience" or "WCSN",		<b>Print out this completed page, and send with cheque to:</b> Winnipeg Chapter Society for Neuroscience c/o SCRC Office, Rm 436 Dept of Physiology, University of Manitoba, 730 William Avenue, Winnipeg, MB R3E 3J7		

For further information contact the Spinal Cord Research Centre Office (204) 789-3761  
or E-mail [WCSN@scrc.umanitoba.ca](mailto:WCSN@scrc.umanitoba.ca)