



NIGERIAN SOCIETY FOR MICROBIOLOGY (NSM)

APPLICATION FOR MEMBERSHIP

I wish to become a member of the Nigerian Society for Microbiology

1. Name: _____
 (Title) (Surname) (Date of Birth) (Other Names)

 ...

2. Academic _____ Qualifications: _____

3. Field _____ of _____ Specialization: _____

4. Occupation: _____

5. Years _____ of _____ Experience: _____

6. Permanent _____ Address: _____

7. Correspondence: _____

Tel. NO. _____ FAX _____ E-mail _____

8. Class of Membership required: (Tick choice): Full/Fellow/Honorary/Life/Corporate/Student
 9. (i) Registration:

Full/Honorary	= ₦6,000.00	=₦	Annual Dues:	Full/Honorary =	₦ 6,000.00
Student (UG)	1000.00			Life =	₦
Life	= ₦		20,000.00	Corporate =	₦
Corporate	= ₦		200,000.00	PG student=	₦ 1000.00
				UG student=	N 500.00

(ii) **Payment:** Pay to any branch UNION BANK NIG. PLC (Idi Araba, Lagos)
 ACC NO: 0007380241, ACC NAME: NIGERIAN SOCIETY FOR MICROBIOLOGY
 Scanned copy of Teller be sent to the Secretary via email address: nsmsecretariat@yahoo.com, amadies2001@yahoo.com,
 * Student membership forms MUST be endorsed by his/her HOD

H.O.D.'s Name _____ Signature _____ Date _____

10. Specialized groups (tick choice): A member of NSM must belong to at least one group
 (a) **Industrial, Food and Pharmaceutical Microbiology Group**
 Incorporate all aspects of Industrial and Environmental Microbiology, Food Microbiology, Pharmaceutical Microbiology
 (b) **Medical Microbiology and Parasitology Group**
 Incorporate all aspects of Pathogenic Microbiology, Immunology, Virology, Parasitology, Public Health.
 (c) **Agricultural Microbiology Group**
 Incorporate Plant Microbiology and Pathology, Rhizobiology, Soil Microbiology, etc.

11. **Declaration:** I declare that the information given above is correct.

Signature:.....

Date:.....

Send the completed form to:

Dr. E.S. Amadi
The Secretary,
Nigerian Society for Microbiology (NSM),
Department of Microbiology, School of Science,
Federal University of Technology, PMB 1526 Owerri, Imo State, Nigeria.

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The above named Prof./Dr/Mr./Mrs./Miss.....Of.....has been accepted
as.....member of the Nigerian Society for
Microbiology (NSM) upon payment of.....naira for which Receipt
No.....of.....was issued. Received by Secretary
on.....Secretary's signature:.....Information sent to Treasurer
on:.....
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