



Phospholipid Research Center e.V.
Im Neuenheimer Feld 515
D-69120 Heidelberg
Germany
Phone: +49 6221 / 5 88 83 60
Fax: +49 6221 / 651 56 65
info@phospholipid-institute.com
www.phospholipid-institute.com

Bank account:
Sparkasse Vorderpfalz
Account no.: 191064617
IBAN: E0454 5500 1001 9106 4617
SWIFT: LUHSDE6AXXX

Membership Application Form

The Phospholipid Research Center e.V. is a scientific non-profit association which focuses in all aspects on the use of and research on phospholipids for pharmaceutical application. The Phospholipid Research Center e.V. therefore supports e.g.

- a) promotion of science in the field of phospholipids
- b) promotion and maintenance of the scientific information and the exchange of opinions between all parties interested in the field of phospholipids and in phospholipids within the scope of the valid laws and regulations
- c) promotion of young scientists
- d) promotion of scientific work and research projects
- e) cooperation between scientists at universities, other research institutions and in industry, and commerce active in the field of phospholipids
- f) carrying out of training and further educational measures
- g) cooperations with national and international organisations with comparable scientific interest and expertise
- h) awards for scientific excellency and
- i) the granting and procurement of research assignments

The members agree to support the objectives and the interests of the association as well as to observe the resolutions and directions of the association's bodies.

The members are entitled to participate in the events of the association.

All natural persons with full legal capacity and a proven education in natural science and/or life science who are interested in the purpose of the Association and who are not members of an organisation actively working against the objectives of the Association may become active members.

All legal entities at home or abroad with full legal capacity who are interested in the purpose of the Association and who are active in research and/or development in the field of natural science and/or life science and are not members of an organisation actively working against the objectives of the Association may become corporate members.

Applicants will submit their written application to the Board. The Board will decide about their admission in its sole discretion. In case of rejection, the Board will not be obliged to notify the applicant about the reasons. Through their admission, the accepted active or corporate member bindingly acknowledges the By-Laws of the Phospholipid Research Center e.V.



Membership Application Form

Herewith, I would like to apply for a membership of the Phospholipid Research Center e.V. In case of admission I bindingly acknowledge the By-Laws of the Phospholipid Research Center e.V. I apply for membership as:

- | | |
|--|-------------------------|
| <input type="checkbox"/> Active Member | € 75 per calendar year |
| <input type="checkbox"/> Student)* Member | € 25 per calendar year |
| <input type="checkbox"/> Corporate Member | € 500 per calendar year |

)* Please provide a copy of the certificate of matriculation

Please completely fill out the following questionnaire:

Please send all correspondence to my Work address Private Address

Name: _____ Mr. / Ms. _____
Title Last First

Work address _____

Job position at institute or company _____

Street: _____

City: _____ Zip: _____ Country: _____

Private address (optional)

Street: _____

City: _____ Zip: _____ Country: _____

Daytime Phone: _____ Fax: _____

E-mail: _____

Please provide a short description of your past and present activities which underscore your background and education in natural science and/or life science.

The Board will decide on your admission as member of the Phospholipid Research Center e.V. You will be correspondingly informed by the Board. Through the admission of member of the Phospholipid Research Center e.V., you bindingly acknowledge the By-Laws of the Phospholipid Research Center e.V.

Signature: _____

Place: _____

Date: _____

Please send back via fax or e-mail.