

SOSORT -Membership



Informations required for the new members

First name

Name

Birth Date

Home address

Street

City

Province

Country

Code

Telephone number

e-mail address

Fax number

Title position

**The number of
previously attended
meeting and the year
and city of the last
attended one**

**Three names of present
members of the society
to whom the society
can write for
recommendation**

With this form, you can send us also your curriculum vitae, a picture and a list of publications

The membership committee