



Membership Form

Full Name:

Qualification: Ph.D. M.Sc. B.Sc. Other (Specify):

Occupation: Affiliation:

Address:

Work Phone: Work Fax:

Mobile Phone: Email:

Type of Membership:

- Active Membership (one Year: 150 SR , Three Years: 300 SR)
- Associate Membership (One Year: 100 SR, Three Years: 200 SR)
- Organization Membership (One Year: 2000 SR, Three Years: 4000 SR)
- Honorary Membership (Free and Awarded by SSMS Board Only)

Payment Method:

- Cash Check Money Transfer (Details:))
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I hereby agree to the rules of procedure and the by-laws of the Saudi Society of Marine Sciences

Signature: Date:

Attachments:

- Two Photos (4x6)
- Copy of Money Transfer form