

ANDROGEN EXCESS & PCOS SOCIETY

Membership Form

Member Information (please print or type)

First Name	
Last Name	
Specialty/Subspecialty	
Institution	
City	
State or Country	
ZIP Code	
Telephone	
E-Mail	

Membership dues

Active members:

- July 2017 – June 2018 membership \$150;
- July 2017 – June 2019 active membership: \$270;

Lifetime active membership: \$1,500;

Associate members

- July 2017 – June 2018 membership \$100;
- July 2017 – June 2019 associate membership: \$180;

I pay membership dues in the form of:

cash _____ check _____ credit card _____ online _____ www.ae-society.org/join

Credit card type	
Credit card number	
Expiration date CVV code	
Cardholder name	

Pay online in our website: www.ae-society.org or by sending credit card data to enrico.carmina@ae-society.org or by sending checks to the following address: Androgen Excess and PCOS Society, via delle Croci 47, First floor, suite 10, 90139 Palermo, ITALY Make checks payable to Androgen Excess Society.