



Southeastern Geophysical Society Membership Application Form

Fiscal Year
June 1, 2010 – May 31, 2011

We are updating our records, please fill out all information

Member Information:

Name:

First

Last

Professional Membership:

SEG Status:

Active

Associate

Student

Not a Member

Primary Address:

Business

Home

Company _____

Address _____

Phone _____

E-mail _____

Secondary Contact Information: (This will only be used if we can not contact you with the primary information)

Phone _____

E-mail _____

Dues are \$25

(\$10 for students : must show Student ID)

Please make Checks payable to SGS and mail to:

SGS Secretary

P.O. Box 57141

New Orleans, La. 70157-7141

Cash: _____

Check NO.: _____

Date Paid: _____