

## ***Application for Membership***

### **To apply for membership:**

Complete this form, providing all information requested. Incomplete form will not be accepted.

### **Application form for membership**

1. Last Name (family name):
2. First Name:
3. Company/Institution:
4. Company/Institution URL (if available):
5. Street Address:
6. City:
7. State/Province:
8. Postal/Zip Code:
9. Country:
10. Email Address:
11. Phone Code:
12. Phone:
13. Fax:
14. Main field of interest in agrometeorology (1):
15. Main field of interest in agrometeorology (2):
16. Main field of interest in agrometeorology (3):
17. Main field of interest in agrometeorology (4):
18. Main field of interest in agrometeorology (5):

\*Kindly mail us this form by Email ID: [insam.agro@gmail.com](mailto:insam.agro@gmail.com)

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