



## MEMBERSHIP FORM

### Personal Data

**Title:** \_\_\_\_\_

**First Name** \_\_\_\_\_

**Last name** \_\_\_\_\_

**Address** \_\_\_\_\_

**Postcode / City** \_\_\_\_\_

**Country** \_\_\_\_\_

**Phone Numbers** \_\_\_\_\_

**Email** \_\_\_\_\_

**The first 100 members will be considered “founding members” and enjoy the first year exempt of the membership fee and reduced fees (20%) for the upcoming events.**

Regular Annual Membership Fee: Professionals from Europe, USA, Canada: 50,-€; from Africa, Asia and Latin America 25,-€. Students 25,-€

**Bank account details will be provided by the Technical Secretariat by email after confirmation.**

### **Technical Secretariat**



[info@immunonutrition-isin.org](mailto:info@immunonutrition-isin.org)  
[www.immunonutrition-isin.org](http://www.immunonutrition-isin.org)

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Date

Signature