

APPLICATION FOR MEMBERSHIP

1. Please check your entries and ensure that the form is filled in correctly
2. Email or post the form to the British Society for Immunology

Membership Department, BSI, 34 Red Lion Square, London, WC1R 4SG Tel: + 44 (0)20 3019 5901 or membership@immunology.org

Once your application has been processed, you will receive an acknowledgement along with a welcome letter.

If you are applying for a concessionary membership you will be asked to provide proof. We will email you with further details. This will not impact your membership start date.

By completing this application you are agreeing to the British Society for Immunology terms and conditions and policies which can be found at www.immunology.org/about-us

PERSONAL DETAILS

Title First name(s)

Surname Suffix

Date of birth Gender: Female Male Unspecified

Nationality

Home address

.....

..... Postcode

Primary contact address ?

Phone (primary)Phone(alternative).....

E-mail (primary)

Email (alternative).....

Skype Twitter.....LinkedIn.....

WORK/STUDY INFORMATION

Job TitleCurrent employer/organisation.....

Employer/organisation address.....

.....

..... Postcode

Primary contact address ?

Orchid ID

MORE ABOUT YOU

The following information will help us find out about the make-up of the membership and your interests and concerns, thus enabling us to provide you with a better service.

The information will be held on the Society's database and will not be made available to third parties, although we may forward information to you on their behalf. To view our terms and conditions plus policies please go to www.immunology.org/about-us

CAREER FOCUS	Please select relevant information (you can select more than one)
Animal Health	Translational Research
Basic Research	Science Policy, Communication and Public Engagement
Clinical Practice	Medical/Scientific Communication
Clinical Research	Science Funding
Clinical Scientist	Teaching
Publishing	Pharmaceutical
Intellectual Property and Technology Transfer	Scientific Support/Admin (e.g. patenting, marketing, project management)
Nursing	Other
Public Health	

WORK PLACE/SECTOR	Please select relevant information
Government	Research Institute
Higher Education / University	Retired
NHS	School and Further Education
Pharmaceutical (Industry)	Publishing
Biotechnology (Industry)	Medical Research Charities and Research Councils
	Other

WORK GRADE	Please select relevant information
Graduate Teaching Assistant/PhD Student	Professor
Early Careers Researcher	Technician
Research Associate/Fellow	Biomedical/Clinical Scientist
Lecturer	Junior Doctor
Senior Lecturer	Registrar
Reader	Consultant
Assistant/Associate Professor	Undergraduate
Principle Investigator	Masters Student
	Other (Specify)

GET INVOLVED

Interested in Public Engagement

Yes No Please contact me with further information

Interested in media work

Yes No Please contact me with further information

Interested in policy work

Yes No Please contact me with further information

HOW DID YOU HEAR ABOUT US

- Attended a BSI event Internet Membership as part of course
 Previous member Publication Recommendation from supervisor
 Word of mouth recommendation Other

I wish to be included in the BSI membership directory online (accessible only to BSI members with a password) Yes No

If you do not let us know your wishes we will assume you are happy to be included in the online directory.

UPDATE YOUR COMMUNICATION PREFERENCES

Please tick all that are applicable

- I would like to receive a hard copy of Immunology News (UK members only)
 I would like to receive an online copy of Immunology News
 I do not wish to receive Immunology News
 I am happy to receive information on the work of the BSI including our news, journals and events
 I am happy to receive mailings from corporate and other organisations*

* We will not, unless otherwise stated, share your personal information with any third parties but if you choose to purchase any subscriptions, services or publications from us we will pass your personal information to a secure, third-party payment service provider and any such third party will require further information from you in order to process your payment.

If you subscribe to or request copies of our publications we may need to provide details of your name and address to third parties for the purpose of dispatch and distribution. This information will always be provided with a prohibition on use other than for the purpose for which it is specifically provided.

REGIONAL AND AFFINITY GROUPS

Please select relevant Regional and /or Affinity Groups you would like to join (you can select more than one)

Affinity Groups

Autoimmunity Group
Comparative & Veterinary Immunology Group
Histocompatibility & Immunogenetics Group
Infection & Immunity Group
Inflammation Group
Leukocyte Migration Group
Lymphocyte Immunosenscence & Differentiation Group
Mathematical Modelling Group
Molecular Immunology Group
Mucosal Immunology Group
Neuroimmunology Group
Nutritional Immunology Group
Parasite Immunology Group
Reproductive Immunology Group
Stromal Immunology Group
Tumour Immunology Group
Vaccine Immunology Group

Regional Groups

Aberdeen Immunology Group
Bristol Immunology Group
Cambridge Immunology Group
East Anglia Immunology Group
East Midlands Immunology Group
Edinburgh Immunology Group
London Immunology Group
Manchester Immunology Group
Merseyside Immunology Group
North East Immunology Group
Oxford Immunology Group
Scottish Immunology Group
South Wales Immunology Group
Tayside Immunology Group
Ulster Immunology Group
Wessex Immunology Group
West Midlands Immunology Group
West of Scotland Immunology Group
Yorkshire Immunology Group

AREAS OF INTEREST/EXPERTISE

Please select your relevant area of interest/expertise (you can select more than one)

Antigen Presentation	Innate Immunity
Autoimmunity	Lipopolysaccharides
Acute Phase Proteins	Macrophages
Allergy	Microbiota
Antibodies	Microscopy
Apoptosis	Molecular Immunology
B Cells	Mucosal Immunology
Bacteriology	Natural Killer Cells
Cancer Immunotherapy	Neuroimmunology
Cell Signalling	Pancreas
Chemokines	Panomics
Chemotaxis	Parasitology
Clinical Immunology	Phagocytes
Comparative Immunology/Evolution	Reproductive Immunology
Complement	Rheumatology
Co-stimulation	Skin
Cytokines	Spleen and Lymph Nodes
Cytotoxicity	Stem Cells
Dendritic Cells	Stromal Cells
Diabetes	Structural Immunology
Endothelial Cells	T Cells
Endotoxic shock	Thymus
Fungal	Transgenesis
Gene Regulation	Transplantation
Gene Therapy	TSEs
Haematopoiesis	Tumour Immunology
Immunity of Infection	Vaccines
Immunodeficiency	Virology
Immunomodulation	White Blood Cells
Inflammation	

MEMBERSHIP TYPES

Type of Membership (All membership categories apply to overseas)	Full Member	Postgraduate ⁱ	Early Careers ⁱⁱ	Concessionary ⁱⁱⁱ	Undergraduate	Overseas (low income economies only) [#]
PRICES ^{iv}						
One year	£75	£25	£40	£20	Free	Free
Three year	£180	£60	£95	-	-	-
Five year	£300	-	£160	-	-	-

Other multi-year rates (up to 5 years) are available if these do not apply. Please contact membership@immunology.org

- i Postgraduate including PhD, Masters.
 - ii Early careers includes scientists employed as post-doctoral researchers, for the first 5 years post graduation.
 - iii Concessionary includes Parental leave, Career Breaks, Retired, Emeritus Retired.
 - iv All prices are subject to the cancellation policy.
Concessionary membership rates end at the renewal date following the concessionary end date.
Proof of concessionary status must be provided.
Multi-year concessionary memberships can be pro-rated but this must be agreed in advance.
- # Low income economies include Liberia, Benin, Madagascar, Burkina Faso, Malawi, Burundi, Mali, Cambodia, Mozambique, Central African Republic, Nepal, Chad, Niger, Comoros, Rwanda, Democratic Republic of the Congo, Sierra Leone, Eritrea, Somalia, Ethiopia, South Sudan, Gambia, Tanzania, Guinea, Togo, Guinea-Bissau, Uganda, Haiti, Zimbabwe, Democratic People's Republic of Korea.

PAYMENT TYPES

I wish to pay by (please complete appropriate form below)

Direct Debit

Credit Card

Invoice

(we will contact you to take payment over the phone)

PAYMENT BY INVOICE

Invoices will only be issued to organisations. If you wish to pay by invoice please state the name and address of organisation below and any purchase order number

Organisation Name.....

Address

.....

Purchase order number (if applicable)

Email address to send invoice.....

