

NAME: _____

INSTITUTION: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____

FAX: _____

E-MAIL: _____

DATE: _____

Please mark the option for your **membership**

One year membership (2018)

40 Euro Individual 20 Euro Student 100 Euro Institution*

Two years membership (2018-2019)

72 Euro Individual 180 Euro Institution*

* Individual members of a member institution pay 50% (20 Euro for one year or 36 Euro for two years membership)

Signature: _____

Please **mail or fax this page to:** EGREPA (student members please include evidence of student status)

e-mail: michael.brach@uni-muenster.de

fax: ++49 251 83-34862

phone: ++49 251 83-38420

Make bank transfer payable to:

Payee: European Group for Research into Elderly and Physical Activity

Account: IBAN: DE42 4005 0150 0034 2208 06 (Account No: 34220806)

Bank name: Sparkasse Muensterland-Ost (Swift-BIC: WELADED1MST , BLZ: 40050150)

Bank address: Weseler Straße 230, 48151 Münster

Payment for: EGREPA membership 2018 or 2018 & 2019 (include YOUR NAME)

Thank you very much! Michael Brach, Treasurer