

# 美洲華人生物科學學會



## Society of Chinese Bioscientists in America

SCBA Headquarter: Boston Children's Hospital, CLS 12064, 3 Blackfan Circle, Boston, MA 02115, USA

Tel: 617 919-2257; FAX: 617 919-2771

Send form to Dr. Xi He (e-mail: [Xi.He@childrens.harvard.edu](mailto:Xi.He@childrens.harvard.edu)) at the above address

Website: <http://www.SCBAociety.org/>

### Membership Application (please complete 1 and 4; 2 and 3 are optional)

(1) Membership (SCBA):

Life Regular (LR) - \$350/Life       Life International (LI) - \$250/Life

Regular (R)- \$35/Year;       International (I)- \$25/Year;       Trainee (T)-\$15/year

(2) Specialty Division Membership: Bio/Pharm [ ]; Neuroscience [ ]; Cancer [ ] (must be a SCBA member):

Regular \$15/Year,       \$150/Life       Trainee (T)- \$5/Year      for each Division Membership

(3) Contributions: \$\_\_\_\_\_ (nonprofit organization, tax deductible):

To be applied to  SCBA General Fund,  Division Fund (please specify), and/or

Special Project:

(4) Total Membership fee & Contributions: \$\_\_\_\_\_ (Make check payable to SCBA or pay online via PayPal

<http://www.scbasociety.org/Membership/Membership.html>) to the SCBA Executive Director, Dr. Xi He

([Xi.He@childrens.harvard.edu](mailto:Xi.He@childrens.harvard.edu)), Date of payment \_\_\_\_\_

### Applicant Information

Name (English): \_\_\_\_\_ (Chinese): \_\_\_\_\_

Nominee: Sex:  M,  F.      Position Title: \_\_\_\_\_

(Optional Information for Home)

Office Address: \_\_\_\_\_ Home Address: \_\_\_\_\_

Telephone (O): \_\_\_\_\_ Tel (H): \_\_\_\_\_

Fax (O): \_\_\_\_\_ Fax (H): \_\_\_\_\_

E-mail (O): \_\_\_\_\_ E-mail (H): \_\_\_\_\_

Professional/Personal Home Page (Optional): [http:// www.](http://www.) \_\_\_\_\_

Preferred address for contact:  Office or  Home

Education and Training (degrees, year conferred, fields of study, institution and address):

- 1.
- 2.

Professional Experience (present position first, include position, dates, institution):

- 1.
- 2.

Membership in Scientific Societies (list not more than 2):

- 1.
- 2.

Signature of Nominee: \_\_\_\_\_ Date \_\_\_\_\_

Nominated by (must be a SCBA member): Chris Lau Date 1/9/2017