



BICA SOCIETY

Membership Application

Please refer to bylaws for detailed membership information (<http://bicasociety.org/about>)

Dr. / Mrs. / Ms. / Mr _____

Last Name _____ First Name and Middle Initials _____

E-mail Address _____

URL _____

Business Phone _____ Home or Mobile Phone _____ Fax _____

Additional electronic contact info (Skype, etc.) _____

Degree(s) _____

Affiliation: _____

Department _____

Institution or Company _____

Address _____

City _____ State/Province _____ ZIP/PostalCode _____

Country _____

Areas of Research / Study / Expertise: _____

For Students: School _____

Dean's Name and Phone or Email _____

Degree Pursuing _____ Expected Date of Completion _____

MEMBERSHIP CATEGORY

The fees are for the 2010-2011 academic year. Please check one:

Regular Member (\$50 USD) Affiliate Member (\$30 USD) Student Member (\$25 USD)

ABRIDGED SUMMARY OF MEMBER BENEFITS

The package of member benefits includes, among other benefits (please refer to bylaws), the following:

- A discount in registration for BICA 2011 (\$50 Regular, \$30 Affiliate, \$25 Student members).
- Access to the electronic repository of BICA Society, including its public and member-only components.
- An email account and a personal web page (indexed in the repository) at bicasociety.org

For example, a member can post on the provided personal web page own publications for public access and have them indexed in the repository. Optionally, access to posted materials can be limited to BICA Society members. In cases when the copyright agreement does not allow any posting of the publication, the publication still can be made available via auto-email response to requests (this option will be also provided by the BICA Society). The shared society web page will include many other features.

METHOD OF PAYMENT

Option 1: Credit Card Number: _____

Card Type _____ Exp. Date: _____ Security Code: _____

Name as it appears on the Card: _____

Billing Address _____

City _____ State/Province _____ ZIP/PostalCode _____

Country _____ Billing Phone Number _____

Date: _____ Signature: _____

Option 2: Check payable to BICA Society is enclosed

SUBMISSION AND PROCESSING OF THE APPLICATION

The application can be faxed to: 1-877-532-0197, or mailed to (include a check if paying by check, do not mail money orders or cash): *BICA Society, 4450 Rivanna River Way #3707, Fairfax, VA 22030-4441, USA.*

Your application will be considered by the board of Directors, and the decision will be made as soon as possible (**unless the decision was made a priori, in which case you were invited to membership**). You will be notified about the decision, and your credit card will be charged or the check will be deposited if your application is accepted. Otherwise, the check or the credit card information will be destroyed. Upon acceptance, an electronic membership certificate will be issued to you. You can also apply online at <http://bicasociety.org/membership/>.