

Dr Mr Mrs Ms

Name _____

Position/Title _____

Company/Affiliation _____

Work Address _____

City _____ State _____

Zip +4 _____ Country _____

Home Address _____

City _____ State _____

Zip +4 _____ Country _____

Mailing Address Work Home

- Please do not send me SIMB information via email
- Please do not include me on any SIMB mailing lists
- Please do not include my information in the SIMB online membership directory

Work Telephone _____

Work Fax _____

Email _____

Home Telephone _____

Home Fax _____

Highest Degree/Year _____

Recommended By _____

What Is Your Area of Expertise? (Check One)

- Fermentation (non-food or beverage)
- Cell Culture
- Metabolic Engineering/Strain Engineering
- Molecular Biology/Synthetic Biology Tools Development
- Biocatalysis/Enzymology/Biochemistry/Enzyme Engineering
- Biomass Pretreatment, Deconstruction, and Conversion
- Antibiotics/Secondary Metabolites/Natural Products/Pharmaceuticals
- Microbiome Research/Metagenomics
- Microbial Control/Biocides & Disinfectants/Clinical & Medical Microbiology
- Environmental Microbiology/Bioremediation
- Food Microbiology and Safety
- Brewing, Winemaking, and Fermented Foods
- Systems Biology, Omics, Computational Biology, and Bioinformatics
- Process Development & Biochemical Engineering
- Agriculture/Plant Biology
- Marine, Aquatic Biology & Algae
- Mycology/Fungal Biotechnology
- Analytical Chemistry, QA/QC
- Regulatory Affairs, IP, and Sustainability

How Did You Hear About SIMB? (Check One)

- Colleague/Networking
- SIMB Meeting Annouc.
- Direct Mail Solicitation
- SIMB News
- Social Media
- SIMB Local Section
- SIMB Member
- Journal of Industrial Microbiology & Biotechnology*
- Professor
- SIMB Website
- SIMB Meeting Attendance

What Is Your Primary Occupational Activity? (Check One)

- Teaching
- Academic Research
- Industrial Research
- Government Research
- Process and/or Product Development
- Manufacturing
- QC/QA & Testing
- Executive
- Management
- Grad Student/Post-doc
- Sales
- Consultant

2024 Calendar Year Dues (January 1–December 31)

Note: 2024 memberships are accepted until September 30.

SIMB Membership

New Renewal

- Regular** \$150.00
- Student** (graduate students & post docs) \$40.00
- Emeritus** (current Emeritus members ONLY) \$No Cost

Membership Subtotal \$ _____

Additional Services

- Consultant Services** add \$50.00

Services Subtotal \$ _____

SIMB News

Please select a delivery method. **Note: The default delivery method is print if no option is selected. If you DO NOT want a print copy mailed, select online access only.**

- SIMB News MAIL Print Copy
- SIMB News Online Access ONLY

Grand Total \$ _____

Method of Payment

- Check Enclosed. Payable to SIMB (Check must be drawn from a US bank)

Charge My: MasterCard Visa AMEX

- Wire Transfer (Additional Fees Apply)

Credit Card # _____

Expiration Date _____

Name on Card _____

Signature _____

SIMB Code of Conduct

I have reviewed and agree with the SIMB Code of Conduct

(form will not be processed if box is not checked)

Send Payment To:

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