SIMB Society for Industrial Microbiology and Biotechnology

2027 SIMB Individual Membership Application

☐ 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

Email:

T:

F:

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

2027 Calendar Year Dues (January 1–December 31)

Note: 2027 memberships are accepted until September 30.

SIMB Membership

☐ New ☐ Renewal

☐ **Regular**	$175.00
☐ **Student** (graduate students and post docs)	$50.00
☐ **Emeritus** (current Emeritus members only)	$No Cost

Membership Subtotal $ _____

Additional Services

☐ **Consultant Services**	add $50.00

Services Subtotal $ _____

Method of Payment

☐ Check Enclosed* Grand Total $_____

Charge My: ☐ MasterCard ☐ Visa ☐ AMEX ☐ Discover

☐ ACH ☐ Wire Transfer**

Credit Card #:

CCV#: 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)

**Check must be drawn from a US bank*

***Additional fees apply*

Send Payment To:

Society for Industrial Microbiology and Biotechnology • 3929 Blenheim Blvd Ste 92A • Fairfax VA 22030-2421
P: 703.691.3357 x23 • F: 703.691.7991 • E: membership@simbhq.org • www.simbhq.org