



Membership Application

Dr. Mr. Ms. Mrs. Miss Fr.

NAME: _____ EMAIL: _____

ADDRESS: _____ PHONE: _____

_____ FAX: _____

1 year Membership (Jan-Dec)

Regular SSA Membership - BSSA & SRL Electronic; no print - **\$100** _____

Regular SSA Membership - BSSA Electronic; SRL printed - **\$110** _____

Regular SSA Membership - BSSA and SRL printed - **\$120 in North Am** _____

Regular SSA Membership - BSSA and SRL printed - **\$130 outside N.A.** _____

Student* SSA Membership - BSSA & SRL Electronic; no print - **\$25** _____

Student* SSA Membership - BSSA Electronic; SRL printed - **\$35** _____

**Students must provide a copy of their current, validated student id.*

Developing Country** Membership - BSSA & SRL electronic; no print-**\$45** _____

*** Member must live in low-income economy as defined by the World Bank*

Affiliations

EERI Affiliation: \$50 _____

Eastern Section Membership: \$ 5 _____

Priority Shipping

Additional for priority shipping of **SRL** outside U.S.: \$35 _____

Additional for priority shipping of **SRL** in U.S.: \$30 _____

Additional for priority shipping of **BSSA** outside US: \$75 _____

Additional for priority shipping of **BSSA** in US: \$40 _____

Total Enclosed _____

Payment Options:

Check drawn on U.S. bank in U.S. dollars made payable to SSA

International Postal Money Order

Charge card: MasterCard Visa American Express

Account Number _____ Exp date _____

Signature _____

If you have any questions please contact SSA at
membership@seismosoc.org, 510.525.5254