



**SEISMOLOGICAL SOCIETY of AMERICA**

400 Evelyn Avenue, Suite 201, Albany, California 94706

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## Corporate Member Application

Company Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

You may receive up to three copies of each issue of *Seismological Research Letters (SRL)* and the *Bulletin of the Seismological Society of America (BSSA)*. You can designate up to 3 individuals or departments to receive the copies, or you can send them all to the main contact. Each member listed below will also be added to the SSA roster.

### Corporate Member #1 (*main contact*):

Contact Name: \_\_\_\_\_ Email: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_

### Corporate Member #2 (*optional*):

Contact Name: \_\_\_\_\_ Email: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_

### Corporate Member #3 (*optional*):

Contact Name: \_\_\_\_\_ Email: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_

**Listing:** A description of your organization will be listed on the website and in each journal issue. Please email the text you wish to appear with your company name to [info@seismosoc.org](mailto:info@seismosoc.org).

For examples please see: <http://www.seismosoc.org/inside/corporate-memb.php>

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**Payment:** Membership total is **\$2000.00 USD** for January 1 through December 31.

Pay by credit card  Pay by check (mail to SSA office)

Credit Card Type: Visa Mastercard American Express Card Number: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CVV: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Signature: \_\_\_\_\_