### Membership Application/Renewal

**SEND THIS FORM TO:** SPIE • P.O. Box 10
Bellingham, WA 98227-0010 USA
Tel: + 1 360 676 3290 (Pacific Time) membership@spie.org
Fax: + 1 360 647 1445 spie.org/membership

### 1. Name and Address: *(Please print clearly)*

- Dr.  Dr. Prof.  Mr.  Ms.  Unspecified

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<tr>
<th>Last (Family) Name</th>
<th>First (Given) Name</th>
<th>Middle Name or Initial</th>
<th>Suffix</th>
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Please indicate which address you wish us to use to send your journals and other mail:  □ Home Address  □ Business Address

#### A. HOME ADDRESS

- Street Address
- City _____________________________ State _______ Country __________ Zip/Postal Code ________
- Cell/Mobile _____________________ Date of Birth ___________ Highest Degree Received ___________
- Graduation School ________________ Graduation Date (Students and Early Career) ___________

#### B. BUSINESS ADDRESS

- Company Name __________________________
- Department/Mail Stop __________________________
- Street Address __________________________
- City __________________ State _______ Country __________ Zip/Postal Code ________
- Email Address __________________________
- Business Phone ___________________ Ext. _______ Fax ___________
- Title or Position ___________________ EU VAT ID No. (if applicable) ___________________

### 2. Annual Membership Dues

- Individual/Fellow Lifetime Membership  .......................................................... $995
- Individual/Fellow 10-year Membership .......................................................... $1,195
- Individual/Fellow 3-year Membership .......................................................... $350
- Individual/Fellow 5-year Membership .......................................................... $550
- Early Career  . .......................................................... $15
- Early Career 10-year Membership .......................................................... $65
- Early Career 3-year Membership .......................................................... $150
- Early Career 5-year Membership .......................................................... $250
- Emeritus .......................................................... $45
- Student .......................................................... $20

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**Included with Membership is one online journal. Please choose one:**

- □ Journal of Applied Remote Sensing
- □ Journal of Astronomical Telescopes, Instruments, and Systems
- □ Journal of Electronic Imaging
- □ Journal of Medical Imaging
- □ Journal of Micro/Nanolithography, MEMS, and MOEMS
- □ Journal of Nanophotonics
- □ Journal of Photonics for Energy
- □ Optical Engineering

Plus enjoy three open access SPIE journals: Advanced Photonics, Journal of Biomedical Optics, and Neuro photonics.

**Choose additional journal subscriptions online at a Member discount:**

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<th>Online</th>
<th>Additional Journals Total</th>
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| □ Journal of Applied Remote Sensing (Quarterly) | $45
| □ Journal of Astronomical Telescopes, Instruments, and Systems (Quarterly) | $45
| □ Journal of Electronic Imaging (Bi-monthly) | $45
| □ Journal of Medical Imaging (Quarterly) | $45
| □ Journal of Micro/Nanolithography, MEMS, and MOEMS (Quarterly) | $45
| □ Journal of Nanophotonics (Quarterly) | $45
| □ Journal of Photonics for Energy (Quarterly) | $45
| □ Optical Engineering (Monthly) | $45

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**Dues Total**

$________
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3. Digital Library Subscription
1-year subscription, 25 full-article downloads:
Individual/Fellow or Early Career Member  ☐ $145  SPIE Student or Emeritus Member  ☐ $95
1-year subscription, 50 full-article downloads:
Individual/Fellow or Early Career Member  ☐ $195  SPIE Student or Emeritus Member  ☐ $125
Once form is submitted and validated, you will receive an email confirmation with instructions to set up your account. At that point, you may begin using all the features of the Digital Library.

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Select all that apply
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☐ I do not want to receive other email about SPIE conferences, products, and services
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5. Payment Method
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Digital Library Total

$__________

Dues +
Additional Journals +
Digital Library =
TOTAL

$__________