

Remeta Association Membership Application

Please complete the form below to apply for your new annual membership.

New Member Information

First Name	Last Name	Title (Mr., Mrs, Ms., Dr.)

Company Information

Company Name	Title/Position

Address Information

Address		
City	State	Zip
Country		

Contact Information

Office Phone	
Mobile Phone	
Fax	
Email	

Specialties and Interests

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Type of Membership (Please check one.)

<input type="checkbox"/>	Active membership \$45 USD/yr
<input type="checkbox"/>	Associate membership \$35 USD/yr
<input type="checkbox"/>	Academic membership \$25 USD/yr

How did you hear about Remeta?

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Please make Check or Money Order out to
"Remeta Association" and mail to:

Remeta Association
PO Box 691871
Orlando, FL 32869
attn: Membership Department

Payment is also accepted inworld by paying
Neo Prinz in Second Life.

For questions regarding membership:
Remeta Association Phone: +1 (407) 412-9462
Remeta Association Email: membership@remeta.org
Customer Service: <http://getsatisfaction.com/remeta>