

INTERNATIONAL MEMBERSHIP/RENEWAL

Bromeliad Society International



Visit bsi.org to fill out form online

1. MEMBERSHIP INFORMATION

New Renewal Member Number (If available) _____

Do not include my contact information in directory (If checked we will only include name and city)

MEMBER 1

Name _____ Phone _____ Email _____

Address Line 1 _____

Address Line 2 _____

City _____

State/Province _____ Postal Code _____ Country _____

MEMBER 2 For dual membership only

Name _____ Phone _____ Email _____

2. MEMBERSHIP TYPE

Prices reflect US currency

INTERNATIONAL		FIRST TIME MEMBER OR STUDENT	RENEWAL 1 YEAR	RENEWAL 3 YEARS
INDIVIDUAL	Electronic Journal Only	<input type="radio"/> \$15	<input type="radio"/> \$25	<input type="radio"/> \$70
	Printed Journal Air Mail	<input type="radio"/> \$65	<input type="radio"/> \$75	<input type="radio"/> \$215
HOUSEHOLD / DUAL	Electronic Journal Only	<input type="radio"/> \$25	<input type="radio"/> \$35	<input type="radio"/> \$100
	Printed Journal Air Mail	<input type="radio"/> \$75	<input type="radio"/> \$85	<input type="radio"/> \$245
AFFILIATED SOCIETY (Society must meet special requirements)	Electronic Journal Only	N/A	<input type="radio"/> \$35	<input type="radio"/> \$100
	Printed Journal Air Mail	N/A	<input type="radio"/> \$85	<input type="radio"/> \$245
INSTITUTIONAL (Libraries, botanic gardens, unaffiliated societies)	Electronic Journal Only	N/A	<input type="radio"/> \$35	<input type="radio"/> \$100
	Printed Journal Air Mail	N/A	<input type="radio"/> \$85	<input type="radio"/> \$245
COMMERCIAL	Electronic Journal Only	N/A	<input type="radio"/> \$35	<input type="radio"/> \$100
	Printed Journal Air Mail	N/A	<input type="radio"/> \$85	<input type="radio"/> \$245
LIFE MEMBER	Printed Journal Air Mail	<input type="radio"/> \$2500	Individual Only	

3. PLEASE CONSIDER A CONTRIBUTION

BSI General Fund us \$ _____

Journal us \$ _____

Conservation us \$ _____

Education us \$ _____

Research us \$ _____

4. CALCULATE TOTAL

Membership Dues us \$ _____

Contributions us \$ _____

TOTAL US \$ _____

5. SELECT PAYMENT

CHECKS/MONEY ORDERS

US domestic checks, international money orders or foreign bank checks and US funds only.

Make Payable to:

The Bromeliad Society International

CREDIT/DEBIT CARD

or pay online at www.bsi.org

Billing address and mailing address are the same (If checked don't fill out billing address)

Billing Address Line 1 _____	
Billing Address Line 2 _____	
City _____	State/Province _____ Postal Code _____ Country _____
.....	
Credit or Debit Card:	<input type="radio"/> Master Card <input type="radio"/> Visa <input type="radio"/> American Express <input type="radio"/> Discover
Card Number _____	Expiration Date 00/0000 _____ / _____ Month Year
Name as it appears on the card _____	Signature _____
(Please print legibly)	

Return this form with your payment to: Bromeliad Society International
Cherie Lee, Membership Secretary
24672 Pine Ridge Rd
Hockley, Texas 77447, USA

For questions email: membership@bsi.org