



SOCIÉTÉ EUROPÉENNE POUR L'ASTRONOMIE DANS LA  
CULTURE

EUROPEAN SOCIETY FOR ASTRONOMY IN CULTURE

MEMBERSHIP APPLICATION FORM

I have read the statutes of the European Society for astronomy in Culture and I agree with the principles for which the society is working. I wish to become a member of the Society.

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Full name (including title):

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Address for correspondence:

Phone:

Fax:

E-mail:

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Academic qualifications (please state the discipline):

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Languages (please list the languages in which you can read or write):

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List of two people (preferably SEAC members) who can be approached for testimonials:

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Place & date:

Signature: