

STEREOSCOPIC UNION 2017 Application Form



- I wish to join the ISU
 I wish to renew my ISU membership

Name: _____

Address: _____

City, State, _____

Country: _____

Postal Code: _____

Telephone: _____

E-mail: _____

Individual

Family

- | | |
|---------------------------------------------------|----------------------------------------------------|
| <input type="checkbox"/> Annual Dues = US \$20.00 | <input type="checkbox"/> Annual Dues = US \$ 30.00 |
| <input type="checkbox"/> 3 Year Dues = US \$54.00 | <input type="checkbox"/> 3 Year Dues = US \$ 81.00 |
| <input type="checkbox"/> 5 Year Dues = US \$80.00 | <input type="checkbox"/> 5 Year Dues = US \$120.00 |

(or the equivalent in your currency)

Dues Paid for Year 2017 US \$ _____

Dues Paid in Other Currency _____

Donation to the ISU _____

Membership List (Electronic Delivery) US \$12.00 _____

Total Amount Paid: _____

PAYABLE TO International Stereoscopic Union:

ISU Country Representative

CHF Payments: Account 30-6234-4
Post Finance, CH-3040 Bern, Switzerland
IBAN: CH50 0900 0000 3000 6234 4 / BIC: POFICHBE

EUR Payments: Account 91-627977-1
Post Finance, CH-3040 Bern, Switzerland
IBAN: CH07 0900 0000 9162 7977 1 / BIC: POFICHBE

USD Payments: Checks drawn on US Bank or Cash
ISU Country Representative USA – Terry Wilson
1255 Callens Road, Suite D, Ventura, CA 93003-8341, USA