**Membership Application Form**

**The Physiological Society of Japan**

**Membership category** you are applying for (check one):

□ Regular　　　 　　 □ Student

 □ Temporary Regular\* □ Temporary Student\*

\*Temporary membership is effective only for participation in an annual meeting and

regional meetings.

**Name of Applicant**:

　　　　　　　　　　　　　Last　　　　　 　　　　 First　　　　　　　 　Middle

**Date of Birth**: **Gender**: □ Male □ Female

 Month/ Day/ Year (Optional)

**Nationality:**

**Address for Correspondence**

Street

City/State/Zip/Country

Phone Fax

E-mail Address URL

**Education** (For student membership, include the degree and pending date of completion)

 Institution Field of Study Dates Degree

1.

2.

3.

**Current Employment**

 Title Institution Department

**Prior Positions**

 Title Institution Department

**Areas of Research** (select up to 3 categories from the following list)

 1.

2.

3.

[PSJ sections]

**1.** Adaptation and environment **2.** Aging **3.** Autonomic nervous system

**4.** Blood and immune system **5.** Cardiovascular system

**6.** Cellular and molecular physiology **7.** Chronobiology

**8.** Comparative and evolutionary physiology **9.** Endocrinology and reproduction

**10.** Exercise and physical fitness **11.** Experimental methods **12.** Developmental physiology **13.** Gastrointestinal system **14.** Ion channels and membrane transporters

**15.** Kidney, water and electrolyte homeostasis **16.** Metabolism **17.** Motor system

**18.** Muscle physiology **19.** Neurophysiology and neuroscience

**20.** Oriental medicine (Acupuncture, Moxibustion, Chinese medicine)

**21.** Pathophysiology and medicine **22.** Physiome and systems biology **23.** Rehabilitaion **24.** Respiration physiology **25.** Sensory system **26.** Teaching of physiology

**27.** Other (specify)

**Publications** (List your important publications during the past 5 years)

**Reason for application** (Please briefly describe why you want to obtain membership)

**Recommender**\*\*

Name

Society ID , Signature

 \*\*If you belong to any institution in Japan, you need a recommender.

**Signature of Applicant** Date

Send your application to The Physiological Society of Japan

International Medical Information Center,
Shinanomachi-Rengakan, 35 Shinanomachi,
Shinjuku-ku, Tokyo 160-0016,JAPAN

E-mail: psj@imic.or.jp Web: http://int.physiology.jp/

For student membership, attach a copy of your current student ID and signature of an adviser.