



Join the
International Society for Prenatal Diagnosis
online at www.ispdhome.org!



**Join for 2010 and 2011 to receive
2010 dues rates for both years!**

ISPD members receive the following benefits of membership:

Membership in Special Interest Groups (SIGs)

- **Laboratory Techniques:** *Noninvasive, PGD, cytogenetics, molecular, arrays*
- **Prenatal Maternal Screening:** *Serum, new methods, policies, community education and information, health professional training, epidemiology (test characteristics)*
- **Fetal Ultrasound:** *Marker detection, congenital abnormality detection, new technologies*
- **Invasive Procedures:** *CVS, amnio, FBS, miscarriage rate, method of analysis, law and ethics, abortion laws*
- **Fetal Therapy:** *Open surgery, gene therapy, twin-twin transfusion, fetoscopy*

Reduced rates for *Prenatal Diagnosis* journal subscription

Members-only website with searchable online member directory

Stay in contact with your peers and make new connections with prenatal diagnosis professionals worldwide.

Select presentations from the 14th and 15th International Conference on Prenatal Diagnosis and Therapy

Members have online access to select slide presentations.

Member listserv for professional networking

Instantly connect with your colleagues all over the world, to ask questions, share information, and post job and meeting announcements!

2010 Members will receive Reduced Rates to the 15th International Conference

The 15th International Conference on Prenatal Diagnosis and Therapy, to be held in Amsterdam, Netherlands, 11 -14 July 2010 , will be chaired by Jan Van Lith MD, PhD, Leiden University Medical Centre (Netherlands), and Karen Sermon MD, PhD, Vrije Universiteit Brussel (Belgium). Visit www.ispdhome.org/conference/2010 for updates!

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2010 Membership Application

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 E-Mail: info@ispdhome.org Website: www.ispdhome.org

Name (Circle one.) Dr Ms Mr Prof _____
 (First) (Middle Initial) (Last) (Degree)

Title _____

Organization (Required) _____

Department or Division _____

Street _____

City, State/Prov. _____ Post Code _____ Country _____

E-mail (Required) _____ Telephone _____

Fax _____

Home Address Office Address

Member Communications ISPD primarily sends member information via e-mail. If you do not wish to be contacted, check here.
 DO NOT e-mail me. DO NOT fax me.

ISPD Membership Fees

ISPD Membership runs on the calendar year (2010 membership is from 1 January 2010 to 31 December 2010).

ISPD Membership (Prenatal Diagnosis **ONLINE** subscription for 2010 included in dues payment)

- Professional Membership US \$ 200.00
- Student Membership* US \$ 75.00

***A letter from an academic advisor/department chair is REQUIRED for a student membership. See www.ispdhome.org for a student letter template.**

ISPD 2010 & 2011 Membership (Full Members Only; Prenatal Diagnosis **ONLINE** subscription included for both years.)

- Professional Membership US \$400.00 ****Get two years of membership at 2010 dues rates!****

ISPD Member Prenatal Diagnosis **HARD COPY** Subscription (13 issues minimum)

- All Members (2010) US \$100.00
- All Members (2010 AND 2011) US \$200.00

Special Contribution

- I wish to make an additional charitable Special Contribution to fund ISPD programs.

Special Contribution Amount US \$ _____

TOTAL PAYMENT (dues, subscription, contribution) US \$ _____

Method of Payment

- Enclosed is my check payable to ISPD. Check # _____

Remittance must be drawn on a U.S. bank or be an international money order in U.S. Dollars. A \$25.00 surcharge may be assessed to cover collection fees.

- Charge to the following credit card (Circle one.) MasterCard VISA American Express

Card Number _____ Expiration Date _____

CV2 Code* _____ Cardholder Signature _____

*3 or 4 digit code located on back of VISA, MasterCard, on front of American Express.

Cardholder Name as it Appears on Card (Please print.) _____

Credit Card Billing Address _____

Please include postal code. _____

Cardholder E-Mail _____ Telephone _____

Additional Information

How did you hear about ISPD? _____

Memberships in other related societies _____

Areas of Interest Please select the area(s) of your interest.

<input type="checkbox"/> Amniocentesis	<input type="checkbox"/> Aneuploidy	<input type="checkbox"/> Array CGH
<input type="checkbox"/> CVS	<input type="checkbox"/> Cytogenetics	<input type="checkbox"/> DNA Diagnosis
<input type="checkbox"/> Ethics	<input type="checkbox"/> Fetal Cells/Nucleic Acids in Maternal Blood	
<input type="checkbox"/> Fetal Therapy	<input type="checkbox"/> Invasive Techniques	<input type="checkbox"/> Molecular Genetics
<input type="checkbox"/> PGD	<input type="checkbox"/> Public Policy/International Issues	
<input type="checkbox"/> Serum Screening	<input type="checkbox"/> Ultrasound/Imaging	<input type="checkbox"/> Other

If Other, please specify _____

Special Interest Groups Please select the SIG(s) below you wish to join.

- Fetal Therapy
- Fetal Ultrasound
- Invasive Procedures
- Laboratory Techniques
- Prenatal Maternal Screening