

**APPLICATION FORM FOR MEMBERSHIP
TO THE HELLENIC ASTRONOMICAL SOCIETY**

Dear Mr. President,

Herewith, I submit my application to become

Ordinary member of HEL.A.S.

I obtained my doctoral degree in from the University of
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.....

Junior member of HEL.A.S.

I am years old (less than 35) and I am a PhD student at
.....
My Adviser is Adviser's signature
.....

Associate member of HEL.A.S.

My application is based on the following reasons, in accordance with article
2g, chapter II of the HEL.A.S. Constitution
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Family Name of applicant
First name Middle name

Office address
.....
.....

Tel.
Fax
E-mail

Home address
.....
Tel.

Place/ Date Signature

Supporting Ordinary Hel.A.S. Members

- 1) Name Signature
- 2) Name Signature

Complete this form and send by mail or fax to the Secretary of Hel.A.S.