

# Membership Enrollment

GESTALT INTERNATIONAL STUDY CENTER

Name \_\_\_\_\_ Age \_\_\_\_\_  Male  Female

Address \_\_\_\_\_

City/State/Province/Postal Code/Country \_\_\_\_\_

Work Phone (please include country code) \_\_\_\_\_

Fax (please include country code) \_\_\_\_\_

Home Phone (please include country code) \_\_\_\_\_

E-mail \_\_\_\_\_

Occupation \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

## Interests:

\_\_\_\_\_  
\_\_\_\_\_

## Membership Fees:

One year - 2009 \$95.00

Two years - 2009 & 2010 \$170.00

Three years - 2009 - 2011 \$240.00

I would like to make a donation in the amount of: \_\_\_\_\_  
(GISC is a 501(c)(3) nonprofit corporation, and we appreciate any contributions you can make. All contributions are fully tax-deductible to the extent allowed by law.)

**Total:** \_\_\_\_\_

I have enclosed payment (check or money order made out to Gestalt International Study Center, in US funds)

Please charge my credit card:  VISA  MasterCard  American Express

\_\_\_\_\_  
Name as it appears on the card

\_\_\_\_\_  
Account Number

\_\_\_\_\_  
Expiration Date

\_\_\_\_\_  
Signature (Required for credit card charges)

## For further information, contact:

Gestalt International Study Center

Phone: 1-508-349-7900

E-mail: office@gisc.org



Please complete this form and return, together with your payment, to:

Gestalt International  
Study Center  
PO Box 515  
South Wellfleet, MA 02663  
USA

Phone: 1-508-349-7900

Fax: 1-508-349-7908

E-mail: office@gisc.org

This form may be duplicated