



INTERNATIONAL SOCIETY OF ELECTROCARDIOLOGY

Promoting the Advancement of the Science of Electrocardiology
www.electrocardiology.org

APPLICATION FOR MEMBERSHIP

Please fill in and submit the form by email. Items in red rectangles are obligatory.
PRINT and SUBMIT buttons will be enabled after the obligatory fields are filled.

1. Personal data:

Name:
 (Mr./Mrs.) (First Name) (Middle Initials) (Surname) (Titles)

Department:

Hospital or University:

Address:

City, State:

Country: ZIP code:

Phone Number: Fax:

E-mail address:

2. My main interests are in the following (please tick all that apply):

<input type="checkbox"/> Mathematical modeling	<input type="checkbox"/> Computer applications	<input type="checkbox"/> Arrhythmias	<input type="checkbox"/> Electrophysiology
<input type="checkbox"/> Body surface mapping	<input type="checkbox"/> ECG diagnostic criteria	<input type="checkbox"/> Exercise ECG	<input type="checkbox"/> Signal averaged ECG
<input type="checkbox"/> VCG	<input type="checkbox"/> Holter ECG	<input type="checkbox"/> Other - please specify:	

Place and date:

I wish to become member of the International Society of Electrocardiology and agree with the Society constitution as shown on the Society web page:

Print the form for your personal records.

Send the filled application form by email to ISE secretary.
Acceptation will be confirmed by email from ISE secretary.