Membership Application

Name: _____

Institution: _____

Address: _____

_____

_____

Fax: _____

e-mail: _____

I/We wish to enroll as a supporting member of the R Foundation for Statistical Computing and will pay the following annual membership fees:

○ EUR 25 (natural person)　　　○ EUR 250 (institution)　　　○ EUR 500 (benefactor)

Details:

○ I authorize the R Foundation for Statistical Computing to withdraw the fee for the current year from my credit card

　　○ Visa　　　　○ Mastercard　　　　　Expiry date: _____

　　Card number: _____

　　Card holder: _____

　　Signature: _____

○ I want to directly transfer the money to the bank account of the R Foundation. Please send me the bank details.

○ Please do **not** include me in the list of members on the R project homepage and in R News.

_____　　_____
Date　　　　　　Signature