

MEMBERSHIP APPLICATION FORM

Please fill out the form and send it to:

ÖGGF – Österreichische Gesellschaft für Geschlechterforschung /
Gender Studies Association Austria
Geschäftsstelle / Office
Reindorfstraße 29/1/11, 1150 Wien, Österreich



PERSONAL DATA

Salutation	Academic Title
First Name*	Last Name*
Professional Affiliation / s*	

POSTAL ADDRESS

Additional Address Information	Street Name/ Number*
Postal/ ZIP Code*	City/Town*
Country*	Phone Number
Email Address*	URL

ALTERNATIVE CONTACT ADDRESS (optional)

Additional Address Information	Street Name/ Number*
Postal/ ZIP Code*	City/Town*
Country*	

FIELDS OF ACTIVITY *

<input type="checkbox"/> Natural Sciences	<input type="checkbox"/> Health and Life Sciences	<input type="checkbox"/> Social Sciences
<input type="checkbox"/> Technical Sciences, Engineering Sciences	<input type="checkbox"/> Agricultural Sciences	<input type="checkbox"/> Humanities and Cultural Sciences
<input type="checkbox"/> Human Medicine	<input type="checkbox"/> Veterinary Medicine	<input type="checkbox"/> Development and Research in the Applied Arts

SUBJECT OF ACTIVITY (Teaching, Research, etc.) (Please enter at least one subject of activity)

_____	_____
_____	_____

FOCUS OF INTEREST RELATING TO GENDER STUDIES (Please enter at least one focus of interest, for example: horror films, Austrian history, etc.)*

_____	_____
_____	_____
_____	_____

* mandatory items

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Please fill out the form and send it to:

ÖGGF – Österreichische Gesellschaft für Geschlechterforschung /
Gender Studies Association Austria
Univ.-Doz. Dr. Maria Mesner
Campus at the University of Vienna
Spitalgasse 2-4/Court 1.11, 1090 Vienna, Austria



MEMBERSHIP*

- Full Individual Membership: 50 EUR p.a.
- Institutional Membership (e.g. legal persons or entities, organisations, etc.): 100 EUR p.a.
- Reduced Individual Membership (e.g. individuals on part-time contracts): 25 EUR p.a.
- Reduced Individual Membership (e.g. students, the unwaged): 15 EUR p.a.

BANK- /ACCOUNT-DETAILS

DIRECT DEBIT AUTHORIZATION:

IBAN*

BIC*

Account Holder's Name*

- I hereby authorize the ÖGGF to withdraw payments of my membership fee from the account specified above by direct debit. This authorization is valid until further notice. This authorization allows the bank operating my account to conduct my membership payments, provided the account holds funds sufficient for such payments. There is no obligation of payment on part of the bank should the account not hold sufficient funds for said payment.

I WOULD LIKE TO GET A YEARLY INVOICE BY THE ÖGGF

Place and date

Signature