**Application for Institutional Membership**

Fax completed form to IA-USE (+86-29-82205958), or email form to [hanou@xauat.edu.cn](mailto:hanou@xauat.edu.cn) or [yangbin@xauat.edu.cn](mailto:yangbin@xauat.edu.cn)

|  |  |
| --- | --- |
| **Institution** | |
| Full name |  |
| Postal address |  |
| Brief introduction of your institution （within 150 words） |  |
| Total number of members |  |
| Institution website |  |
| Institution telephone |  |
| Institution fax |  |
| Institution email |  |
| **Contact Person** | |
| Family name |  |
| Given name |  |
| Title |  |
| Postal address |  |
| Telephone |  |
| Email |  |

By submitting this application, you agree to the Institutional Membership Service and Management Regulation of International Association of Underground Space Environments (IA-USE).

Signature: Date: