



IPRA

International Peace Research Association

INDIVIDUAL MEMBERSHIP APPLICATION / RENEWAL FORM

Membership Type: NEW: RENEWAL: → Membership number:

Personal information

First name and Surname:

Gender:

Job Description:

Institutional Affiliation:

Country of Residence:

RESIDENTIAL ADDRESS:

Town:

Post code or ZIP code:

Country:

Phone:

Email:

WORKING ADDRESS:

Town:

Post code or ZIP code:

Country:

Phone:

Email:

I apply membership into International Peace Research Association.

I hereby acknowledge by signing this application form that the information provided above and on the attached short bio is true

All applicants, please provide: Completed and signed application form and your short bio to introduce you in IPRA membership section (200 words).

Please send completed and signed application form as scanned copy and your short bio to the ipramembership@iprapeace.org

Signature: _____ Date: _____