



24355 Sorrentino Court, Clinton Township MI 48035 • Phone 1-586-791-5961, FAX 1-586-792-7062, E-Mail cryonics@cryonics.org

MEMBERSHIP APPLICATION LIFETIME MEMBERSHIP

Name(s) _____

Address _____

Telephone _____

FAX _____

E-Mail Address _____

Birthdate of Applicant _____ Gender of Applicant Male Female

DATE _____ FEES ENCLOSED YES NO

Signature of Applicant _____

Signature of Parent or Guardian if Applicant is a Minor _____

The membership fee for Lifetime Membership is a one-time payment of \$1,250 for an individual or \$1,875 for a couple (two in the same household). There is no extra membership fee for minor children, including children born or adopted after the parent has become a Member. Additional close family members (spouse, siblings, parents, children) may join with a membership fee of \$625 each. Lifetime Membership is permanent, without payment of dues. Membership confers the right to execute a contract, the right to at least annual financial statements, the right to stand for office according to the By-Laws, and the right to notices and reports of meetings.

Membership fees are not refundable, in whole or in part. They represent one of CI's sources of capital, spent for such things as real estate, equipment, and research. Membership fees are not transferable. For this option (Lifetime Membership), minimum human contract funding (whole body) is \$28,000, a one-time fee payable approximately at time of death or earlier, by life insurance or other means specified in the contract and tailored to the individual.

Please mail in your membership application with check or money order enclosed to:
Cryonics Institute, 24355 Sorrentino Court, Clinton Township MI 48035

You may also pay by credit or debit card or by PayPal online. To send payment via [PayPal](#), please select "SEND" on the PayPal site's top menu, and use the address CIHQ@aol.com.

