

# Society for Meditation and Meditation Research

## SMMR

### Application Form

Last name \_\_\_\_\_

First name \_\_\_\_\_

#### **Address:**

Street: \_\_\_\_\_ Number: \_\_\_\_\_

Postal code: \_\_\_\_\_ City: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

I apply for ordinary membership in the SMMR according to the statute of the SMMR.

Location: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

#### *References:*

1. \_\_\_\_\_

2. \_\_\_\_\_