

SECTION 1: APPLICATION INFORMATION

Check one of the following boxes if this application is being submitted between September 1 and December 31.

(If dues are applied to the forthcoming year, the membership will take effect on January 1, but the candidate will not be eligible to sponsor an abstract for presentation at the Annual Meeting in March or April of that year.)

The enclosed payment should be applied to the Current Year Forthcoming Year (ineligible to sponsor an abstract for upcoming Annual Meeting)

SECTION 2: CANDIDATE INFORMATION (Please type or print clearly)

Last/Family Name: _____ First Name: _____ Middle Initial: _____

Date of Birth (mm/dd/year): _____ Title and Dept.: _____

Institute/Company: _____

Division: _____

Academic Degrees Indicate highest degree earned, year earned, and institution granting the degree. (Indicate multiple degrees as appropriate, i.e., MD, PhD)

Doctoral (M.D., PhD, etc.) _____

Master (MS, MA, etc.) _____

Bachelor (BA, BS, etc.) _____

Associate (AA, AS, etc.) _____

Other (RN, JD, etc.) _____

SECTION 3: CONTACT INFORMATION (Please type or print clearly)

Institute/Company Mailing Address (Preferred mail)

Street Address: _____ Building/Room: _____

City: _____ State: _____

Zip or Postal Code: _____ Country: _____

Telephone (include area code): _____ Cell/Mobile (include area code): _____ Fax (include area code): _____

Email: _____

Home Mailing Address (Preferred mail)

Street Address: _____ Building/Apt.: _____

City: _____ State: _____ Zip or Postal Code: _____ Country: _____

Telephone (include area code): _____ Cell/Mobile (include area code): _____ Fax (include area code): _____

Email: _____

SECTION 4: SCIENTIFIC RESEARCH

Major Focus (Please check only one)

- | | | | | | |
|--|---|--|---|---|---|
| <input type="checkbox"/> Advocacy | <input type="checkbox"/> Business Development | <input type="checkbox"/> Clinical Practice | <input type="checkbox"/> Regulatory Science and Health Policy | <input type="checkbox"/> Research Administration | <input type="checkbox"/> Translational Research |
| <input type="checkbox"/> Basic Science | | <input type="checkbox"/> Clinical Research | | <input type="checkbox"/> Science Education and Training | |

Research Areas of Expertise/Interest (Please check only one)

- | | | | | | |
|--|--|--|---|---|---|
| <input type="checkbox"/> Aging and Cancer | <input type="checkbox"/> Chemistry and Chemical Biology | <input type="checkbox"/> Drug Discovery and Development | <input type="checkbox"/> Genomics, Proteomics, and Other 'Omics | <input type="checkbox"/> Microbiome Research | <input type="checkbox"/> Survivorship Research |
| <input type="checkbox"/> Behavioral and Implementation Science | <input type="checkbox"/> Cancer Evolution | <input type="checkbox"/> Drug Resistance and Toxicity | <input type="checkbox"/> Geriatric Oncology | <input type="checkbox"/> Molecular Biology | <input type="checkbox"/> Systems Biology |
| <input type="checkbox"/> Biochemistry and Biophysics | <input type="checkbox"/> Cancer Metabolism | <input type="checkbox"/> Early Detection and Interception | <input type="checkbox"/> Hematology and Hematologic Malignancies | <input type="checkbox"/> Oncology Nursing | <input type="checkbox"/> Translational Research |
| <input type="checkbox"/> Bioengineering | <input type="checkbox"/> Cancer Modeling | <input type="checkbox"/> Endocrinology | <input type="checkbox"/> Imaging and Theranostics | <input type="checkbox"/> Pathology | <input type="checkbox"/> Tumor Biology and Tumor Microenvironment |
| <input type="checkbox"/> Bioinformatics, Computational Biology, and Data Science | <input type="checkbox"/> Clinical Research/Clinical Trials | <input type="checkbox"/> Epigenetics | <input type="checkbox"/> Immunology, Immunology, and Inflammation | <input type="checkbox"/> Pediatric Oncology | <input type="checkbox"/> Other (please specify) _____ |
| <input type="checkbox"/> Biostatistics | <input type="checkbox"/> Community Practice | <input type="checkbox"/> Experimental and Molecular Therapeutics | <input type="checkbox"/> Infectious Agents and Oncogenesis | <input type="checkbox"/> Pharmacology and Toxicology | |
| <input type="checkbox"/> Cancer Disparities Research | <input type="checkbox"/> Convergence Cancer Science | | | <input type="checkbox"/> Population Sciences | |
| <input type="checkbox"/> Cell Biology | <input type="checkbox"/> Developmental Biology | | | <input type="checkbox"/> Prevention Research | |
| | <input type="checkbox"/> Diagnostics and Biomarkers | | | <input type="checkbox"/> Radiation Science and Medicine | |
| | | | | <input type="checkbox"/> Surgical Oncology | |

SECTION 5: DEMOGRAPHIC INFORMATION

Information concerning gender and ethnic background is solicited to enable the Association to ensure its programs are appropriately serving all members of the cancer research community.

Race or Ethnic Background (Please check only one)

- | | | | | |
|--|---|--|--|---|
| <input type="checkbox"/> African American or Black | <input type="checkbox"/> Asian | <input type="checkbox"/> Caucasian | <input type="checkbox"/> Native American | <input type="checkbox"/> Other (please specify) _____ |
| <input type="checkbox"/> Alaskan Native | <input type="checkbox"/> Asian American | <input type="checkbox"/> Hispanic/Latino | <input type="checkbox"/> Pacific Islander of Native Hawaiian | |

Gender Male Female Nonbinary Prefer not to disclose

SECTION 6: MEMBER CATEGORIES (Select the membership category in which you wish to be reinstated.)

All membership categories receive a complimentary online subscription to *Cancer Today* magazine. Reduced subscription rates to additional AACR journals are also available to all member categories. In addition, the new AACR open access journal, *Cancer Research Communications*, is available for free to all interested through AACRJournals.org.

Active (Active membership includes a complimentary online subscription to **one** AACR journal of choice. Please make selection below.)

- | | | | | |
|---|---|---|---|--|
| <input type="checkbox"/> Blood Cancer Discovery | <input type="checkbox"/> Cancer Epidemiology, Biomarkers & Prevention | <input type="checkbox"/> Cancer Immunology Research | <input type="checkbox"/> Clinical Cancer Research | <input type="checkbox"/> Molecular Cancer Research |
| <input type="checkbox"/> Cancer Discovery | | <input type="checkbox"/> Cancer Prevention Research | <input type="checkbox"/> Cancer Research | <input type="checkbox"/> Molecular Cancer Therapeutics |

Associate (Please indicate level) Graduate Student Medical Student Resident Clinical Fellow Postdoctoral Fellow

Affiliate (Health professionals working in support of cancer research. Special rates offered to Advocates and Survivors.)

Student (Please indicate academic status below; expected graduation date **must** be included.)

- | | | |
|--|---------------------|-----------------------------------|
| <input type="checkbox"/> Undergraduate | Year of Study _____ | Date of Expected Graduation _____ |
| <input type="checkbox"/> High School | Year of Study _____ | Date of Expected Graduation _____ |

