



CINE Membership Application Form



Centre for Indigenous People's Nutrition and Environment
Macdonald Campus of McGill University
21 111 Lakeshore Road, Ste Anne de Bellevue, Qc
Canada, H9X 3V9

Name: _____

Address: _____

City: _____ Province/State: _____

Postal/Zip Code: _____ Country: _____

Phone Number: _____ E-mail: _____

Aboriginal Communities for your research (culture and location)

Existing CINE Member Sponsor: _____

If Student, name of CINE member supervisor: _____

Please enclose evidence of endorsement by your CINE member sponsor with this form.

Membership Type:

- Full
- Associate
- Affiliate
- Student
- Postdoc
- Visitor