CRYONICS INSTITUTE
Technology for Life

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

MEMBERSHIP APPLICATION

ANNUAL (YEARLY) MEMBERSHIP

Name(s) _____

Address _____

Telephone _____

FAX _____

EMail 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 _____

For Yearly Membership the application must be accompanied by the initial dues payment and a $200 initiation fee. This secures your current membership and the right to execute a contract. Dues under Yearly Membership are $120 per year in advance. If dues are not paid when owing, membership lapses and contracts for future cryopreservation are not in force (all contracts for present cryopreservation remain in force).

Membership fees are not refundable or transferable, in whole or in part.

For Yearly Membership members, minimum human contract funding is $35,000, whole-body, a one-time payment approximately at time of death or earlier, by life insurance or other means specified in the contract. Yearly Membership members may switch to Lifetime Membership at any time, by paying the $1,250 Lifetime Membership fee. Credit will be given for dues paid within the previous year.

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 info@cryonics.org.

