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MEMBERSHIP APPLICATION FORM

NAME:

ORGANIZATION:

MAILING ADDRESS:

EMAIL ADDRESS:

COMMENTS:

MAIL THIS FORM TO: Douglas C. Beshore
Merck & Co., Inc.
Department of Medicinal Chemistry
WP14-2
P.O. Box 4
West Point, PA 19486

Please also send a check for \$10, made out to POCC (\$5.00 for students).

MAIL THE CHECK TO: Karen Evans
(you can mail the form here too) Medicinal Chemistry
GlaxoSmithKline
Collegeville, PA 19426-0989