APPLICATION FOR CODE NUMBER TO IDENTIFY FIRM OR PRACTITIONER PERFORMING SERVICE OF FREEZING EMBRYOS

A freeze code is available by completing the following application and paying the appropriate application fee. IETS membership or the one-time paid fee is required to keep the freeze code active and listed on the IETS website.

☐ IETS Member:		□ Non-Member:	
Freeze Code Application Fee:			ode Application Fee: \$500
As long as IETS membership	is kept current		e fee—freeze code remains active
the freeze code is active.		for durat	tion of ownership.
Name of Practitioner			
Name of Firm			
Address			
City	State	Zip Code	Country
Telephone		Fax	
*Email			IETS Member #
*Code Owner			
Signature			
Title		С	Date
A code number consisting of	four digits will	be assigned on re	eceipt of this application. A
confirmation letter will be ma	iled to you afte	er the application	is processed.
Check box to pay by invoice. An invoice will be sent with a	link to pay on	line □	
If paying by check, mail chec	k to the address	s listed below.	
Please complete this applicati	on form and re	turn to the follow	ving:

IETS, 1800 South Oak Street, Suite 100, Champaign, IL 61820 USA Email: iets@assochq.org Fax: (217) 398-4119