

AUSTRALIAN AND NEW ZEALAND BONE AND MINERAL SOCIETY ANZBMS Membership

Title:..... First Name:..... Surname:.....

Organisation:..... Department:.....

Address:.....

..... Postcode:.....

Date of Birth..... Telephone number:..... Fax number:.....

Email:.....

Position:..... Degrees:.....

Areas of interest:.....

Proposed by (please print):..... Signature:..... (Current financial member of ANZBMS)

Seconded by (please print):..... Signature:..... (Current financial member of ANZBMS)

A reduced membership fee is available for student members. Students are defined as full-time students enrolled for degrees or diplomas in a university or other tertiary institution. Students must have their Head of Department / Supervisor sign the statement on the membership form verifying their claim for student membership.

Supervisor's Name and Signature if applying for student membership:.....

Membership Fees including GST (please tick):

Regular (Aust \$) \$146.00..... Student (Aust \$) \$50.00.....

Retired (Aust \$) \$39.00 for 3 years..... Overseas Regular (Aust \$) \$133.00.....

Overseas Student (Aust \$) \$46.00.....

Payment

Cheque/Money Order enclosed \$.....

Credit Card Type: VISA Mastercard

Card Number:..... Card Expiry:.....

Cardholder's Name:..... Amount: \$.....

Cardholder's Signature:.....

**Completed Application Forms with the cheque/money order or credit card details should be mailed to:
ANZBMS Secretariat, 145 Macquarie Street, Sydney NSW 2000, Australia.
Phone: +61 2 9256 5405 Fax: +61 2 9251 8174 Email: anzbms@racp.edu.au**

I agree to ANZBMS forwarding my personal details to third parties in accordance with the ANZBMS Privacy Policy

(see www.anzbms.org.au/mship/privacy.cfm) Please tick: YES NO

Signature:..... Date:.....