Australian and New Zealand Society of Nuclear Medicine Limited (ANZSNM)

ABN: 35 133 630 029

APPLICATION FOR MEMBERSHIP

Tax invoice

Title: **Prof** **Dr** **Mr** **Ms** **Mrs** **Miss** **Membership No:** _____
(Office use only)

Given Name(s): _____ **Surname:**_____

Address: _____

Suburb: _____ **State:** _____ **P/Code:** _____

Phone: _____ **Fax:** _____

Email: _____

APPLICANT DETAILS:

Profession Category: TECHNOLOGIST (Accred#_____) PHYSICIAN RADIOLOGIST PHYSICIST NURSE
RADIOPHARMACIST RADIOLOGY REGISTRAR MEDICAL REGISTRAR OTHER: _____

Qualifications: _____

I wish to become an **Ordinary / Associate** member of the ANZSNM and, if accepted as a member, I undertake to abide by the rules of the Society as laid down in its Federal and relevant Branch Constitutions.

Signature: _____ **Date:** _____

Proposer:
Name: _____ Signature: _____

Seconder:
Name: _____ Signature: _____

(both proposer and seconder must be a financial ordinary member)

ORDINARY membership is open to persons who hold a university degree or other tertiary qualification acceptable to the Council and is involved in any field of Nuclear Medicine or in the production or application of radionuclides in medicine or the biological sciences.
ASSOCIATE membership is available to persons ineligible to be an Ordinary member but involved in Nuclear Medicine studies or research. No member will remain an Associate member for longer than the end of the current subscription year following the date on which they becomes eligible for Ordinary membership
Half annual fee rates apply after 1 July—new members only

FEES:

ORDINARY $165.00 (INC GST) **ORDINARY NZ/ O'SEAS $150.00** **ASSOC/STUDENT $60.50 (INC GST)** **ASSOC OVERSEAS $55.00**

Please pay in Australian Dollars. We accept MasterCard, Visa, Cheques or Money Order. For EFT payment please contact secretariat.

Credit Card Payment

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EXP: _____/_____

CSV: _____

Amt to be debited:
$_____

Cardholder's Name: _____

Please check this box if you wish to receive non-Society emails distributed by the ANZSNM Secretariat ☐

ANZSNM Secretariat
PO Box 6178, Vermont South, Vic 3133
Tel: +61 1300 330 402 Fax: +61 (0) 3 8677 2970 Email: secretariat@anzsnm.org.au