



# AUSTRALIAN & NEW ZEALAND SOCIETY OF RESPIRATORY SCIENCE INC.

([www.anzsrs.org.au](http://www.anzsrs.org.au))

*Leading Respiratory Science in Australasia through the 21st Century*

## Application for Sustaining Membership

*Please complete in BLOCK letters*

### **Contact Details**

Company Name: \_\_\_\_\_

### *Contact Person Details*

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Surname: \_\_\_\_\_

Position: \_\_\_\_\_

Work Address: \_\_\_\_\_ Suburb: \_\_\_\_\_

State: \_\_\_\_\_ Post Code: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone: ( \_ ) \_\_\_\_\_ Facsimile: ( \_ ) \_\_\_\_\_ Mobile: \_\_\_\_\_

E-mail: \_\_\_\_\_

### **Mailing Address** *(if different from above)*

Address: \_\_\_\_\_ Suburb: \_\_\_\_\_

State: \_\_\_\_\_ Post Code: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone: ( \_ ) \_\_\_\_\_ Facsimile: ( \_ ) \_\_\_\_\_ Mobile: \_\_\_\_\_

E-mail: \_\_\_\_\_

### **Applicant Declaration**

I hereby certify that the information in this application is true and correct.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **Proposer**

Prospective members must be proposed by an Ordinary member of the Society (contact the Society Secretary in case of difficulties).

I hereby propose that the company \_\_\_\_\_ represented by \_\_\_\_\_

be admitted as a Sustaining Member of the Australian and New Zealand Society of Respiratory Science Inc.

Proposer's Name: \_\_\_\_\_ Proposer's Signature: \_\_\_\_\_

Proposer's membership number: \_\_\_\_\_ Date: \_\_\_\_\_

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**The Privacy Amendment (Private sector) Act 2001**

The ANZSRS complies with national privacy legislation, The Privacy Amendment (Private sector) Act 2001.

Personal information about Members, as defined by the legislation, may only be provided if the person has authorised the ANZSRS to provide it for a purpose covered by the authority given. All personal information, as defined by the privacy legislation, supplied to the ANZSRS will be treated in accordance with the National Privacy Principles and only shared with related or third parties in accordance with those principles.

By completing and signing this form you give the ANZSRS consent to supply personal information as necessary to process your application to join the ANZSRS, supply the personal information (name, preferred mailing address and contact phone, fax and email) to third parties who seek to promote scientific meetings and/or disseminate information deemed by the Executive to be of interest to members.

The ANZSRS has a policy to publish **work contact details only** of members in the secure Members Only area of the Society's Web-site Membership Directory, unless otherwise instructed.

If you **do not wish** to have your work contact details published in the Membership directory please complete and sign the following section:

I \_\_\_\_\_ **do not** authorise the ANZSRS to publish my work contact details in the Society's Web-site Membership Directory.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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The completed application form, your curriculum vitae and any supporting information regarding your eligibility for membership of the Society, eg relevant publications, should be forwarded by post or fax to the Secretary. Information supplied on this application and the accompanying documentation is necessary to process your application. **Failure to provide the requested information will result in delays.**

Please do **NOT** send in any payment with the application. Once the application has been approved you will receive an invoice which is payable to the Treasurer.

ANZSRS Secretariat  
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KENT TOWN SA 5071  
AUSTRALIA  
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Phone (A/H): 0414 828 731  
Fax: +61 (8) 8363 1604  
Email: [anzsrs@fcconventions.com.au](mailto:anzsrs@fcconventions.com.au)

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**OFFICE USE ONLY**

Application received: \_\_\_\_\_ by \_\_\_\_\_

Application considered at Exec meeting of: \_\_\_\_\_ Application accepted / declined  
Applicant advised of outcome on \_\_\_\_\_ by \_\_\_\_\_

Membership database updated on \_\_\_\_\_ by \_\_\_\_\_

Web-site coordinator advised on \_\_\_\_\_ by \_\_\_\_\_ Fees Paid on \_\_\_\_\_ Rec. # \_\_\_\_\_