

# AUSTRALASIAN PIG SCIENCE ASSOCIATION (INC.)



**APPLICATION FOR: NEW MEMBERSHIP**  **RENEWAL**

<b>TITLE</b>	<b>FAMILY NAME</b>	<b>GIVEN NAMES</b>
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**ADDRESS :** \_\_\_\_\_

<b>STATE OR PROVINCE:</b>	<b>COUNTRY:</b>	<b>POST CODE:</b>
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<b>BUS. PHONE:</b>	<b>BUS FAX:</b>	<b>E-MAIL:</b>
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**QUALIFICATIONS (WITH YEAR):** \_\_\_\_\_

**PRESENT APPOINTMENT:** \_\_\_\_\_

**YOUR MAIN AREAS OF SCIENTIFIC INTEREST**

<input type="checkbox"/> Health	<input type="checkbox"/> Nutrition	<input type="checkbox"/> Management
<input type="checkbox"/> Environment	<input type="checkbox"/> Producer	<input type="checkbox"/> Reproduction
<input type="checkbox"/> Genetics	<input type="checkbox"/> Behaviour and welfare	<input type="checkbox"/> Meat and eating quality
<input type="checkbox"/> Growth and physiology	<input type="checkbox"/> Molecular biology	<input type="checkbox"/> Biotechnology

**Please indicate Membership type requested**

- A\$33 for Australian students\* and A\$30.00 for New Zealand students\*
- A\$55 for Australian full members and A\$50.00 for New Zealand full members and overseas students\*
- A\$80 for overseas full members

*Membership fees are biennial – i.e. from July 1 2006 – June 30 2008. New members pay a joining fee of **A\$50** as well as the applicable fee*

**Payment Details**

I wish to pay by:  **Cheque - in Australian Dollars**     **Credit Card - in Australian dollars**

Please make cheques payable in Australian dollars to 'Australasian Pig Science Association Inc' and **post** to address as shown below, or complete the necessary details to pay by credit card and **fax** to 61 8 9474 1295

Please charge my credit card     **Visa**     **MasterCard**     **Bankcard**

**Card Number**

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Full name on card: \_\_\_\_\_

Amount: \$ \_\_\_\_\_ Expiry Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Receipt Required?     Yes     No

\* Student members must have the following statement signed by their Head of Department/Faculty or Supervisor

I certify that \_\_\_\_\_ is a full-time student in my Department.

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

Signature \_\_\_\_\_

**Please print this membership renewal/application form and post with your cheque or fax the completed form to:**

APSA Memberships: Megan Trezona  
 Biosecurity & Research  
 Department of Agriculture and Food WA  
 Locked Bag No. 4  
 Bentley Delivery Centre WA 6983

Fax +61 8 9474 1295