



Australian Association of Gerontology
 Suite 154, 236 Hyperdome, LOGANHOLME QLD 4129
 Phone: (07) 3103 1391 Fax: (07) 3829 9730
 Email: enquiries@aag.asn.au
 www.aag.asn.au

ABN: 95 896 674 194

INDIVIDUAL MEMBERSHIP APPLICATION FORM
 1 JULY 2010 – 30 JUNE 2011

Prof/Dr/Mr/Mrs/Miss/Ms First Name(s) in full: Surname:
 Position: Department:
 Organisation:
 Postal Address:
 Postcode:
 Telephone: Mobile: **Email:**

MEMBERSHIP (All Fees are GST Inclusive)

Individual Membership **includes** 4 editions of *Australasian Journal on Ageing*. Note: If you receive the AJA through personal membership of another association (e.g. ANZSGM), please contact the Secretariat.

New members joining after 1 January pay 50% of the annual fee for membership to 30 June of that year.

	WITH AJA	WITHOUT AJA	JOINING FEE	
<input type="checkbox"/> Individual Membership	<input type="checkbox"/> \$246.80	(on request)	<input type="checkbox"/> \$ 25.00	\$.....
<input type="checkbox"/> Student#	<input type="checkbox"/> \$143.50	<input type="checkbox"/> \$ 35.70	N/A	\$.....
<input type="checkbox"/> Emerging Researcher/Early Career Practitioner*	<input type="checkbox"/> \$180.40	<input type="checkbox"/> \$ 72.60	<input type="checkbox"/> \$ 25.00	\$.....
<input type="checkbox"/> Concession (income under \$35,000 p.a.)	<input type="checkbox"/> \$180.40	<input type="checkbox"/> \$ 72.60	<input type="checkbox"/> \$ 25.00	\$.....
<input type="checkbox"/> Retiree	<input type="checkbox"/> \$180.40	<input type="checkbox"/> \$ 72.60	<input type="checkbox"/> \$ 25.00	\$.....
Donations:	The RM Gibson Scientific Research Fund in Gerontology			\$.....
	The Gary Andrews Visiting Fellow Fund			\$.....
Total Payment Due:				\$.....

PAYMENT DETAILS

Cheque / money order for \$ payable to the **Australian Association of Gerontology** is enclosed, or:
 I have made an electronic funds transfer (EFT) for \$ on (date) to
Account Name: Aust Association of Gerontology Inc **BSB:** 034-264 **Account No:** 261509
Reference: Please use your surname as the reference

Please charge Mastercard VISA

Credit card number

Amount \$ Expiry Date/.....

Print cardholder's name Signature

Please post to AAG (address above). For EFT and credit card payments, the form may be faxed to: (07) 3829 9730
This application becomes a Tax Invoice upon Payment

and * - please see over



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For our records, please complete/check the details below and return with your membership application.

TITLE: **FIRST NAME:** **SURNAME:**

PROFESSIONAL BACKGROUND (select up to 2)

- Administration
- Allied health
- Architecture
- Dentistry
- Education
- Geriatric medicine
- Law
- Medical – other
- Nursing
- Pharmacy
- Psychiatry
- Psychology
- Social science
- Social work
- Other, please specify

MAIN WORK SETTING (tick only 1)

- Government - Commonwealth
- Government – State
- Government - Local
- Hospital
- Residential Care
- Community Care
- Community Health Centre
- Independent Research Institute
- University
- Private Consultant
- Other, please specify

ABORIGINAL STATUS

- Are you:
- | | |
|-------------------------------------|---|
| <input type="checkbox"/> Aboriginal | <input type="checkbox"/> Torres Strait Islander |
| <input type="checkbox"/> Both | <input type="checkbox"/> Neither |

CURRENT & PREVIOUS STUDY/QUALIFICATIONS

Are you currently undertaking study?
 No Yes - full-time Yes - part-time

Number of years working in ageing related field:

Most recent qualification (date/details):

.....

SECTOR INVOLVEMENT

- Private Public
- NGO/Community Not applicable

CURRENT FIELD OF PRACTICE (tick only 1)

- Administration – government
- Administration – other
- Allied health - physiotherapy
- Allied health – occupational therapy
- Allied health – other (specify)
- Education
- Geriatric medicine (inc. psychogeriatrics)
- Independent consultant
- Medicine – other
- Nursing – community care
- Nursing – residential care
- Nursing – other
- Research
- Retired
- Service provider – administration
- Service provider – direct care
- Social work
- Other, please specify

SECTOR INVOLVEMENT

- Private
- Public
- NGO/Community
- Not applicable

WHERE DID YOU HEAR ABOUT THE AUSTRALIAN ASSOCIATION OF GERONTOLOGY?

- (Please state)
- AAG Website
 - Conference
 - AAG Member
 - Search Engine
 - Other (please state)

Student

A student member is a graduate student or full-time undergraduate student actively working toward a degree or certificate in an area of study involving a major emphasis on ageing. Verification of full-time student status may be required.

* Emerging Researcher/Early Career Practitioners

This membership aims to welcome emerging ageing researchers and practitioners who are involved in ageing, but may not be in a financial position yet to join as individual members. This membership is designed to cover the first three years post-PhD completion or the first three years of employment in the ageing workforce. After three years, ER and ECP must convert to an individual membership.