

# Membership Application

*As a member of the AAG, you will be a part of Australia's largest community of researchers, health and aged care professionals, policy workers and other experts engaged in ageing, drawn from diverse professional backgrounds. The multidisciplinary nature of the AAG provides you with the opportunity to network and learn from the expertise and experience of other professionals that is focused on evidence based practical approaches to improving the experience of ageing for all. The AAG has a range of membership options to choose from.*

## AAG MEMBERSHIP OPTIONS

### ▶ INDIVIDUAL MEMBERSHIPS

The AAG offers five different types of individual membership to suit you and your career. If you are not sure of the membership type most appropriate for you, please contact us.

Membership Type	Description
Individual	Designed for individuals with an interest in ageing or expertise in gerontology.
Student	Designed for full-time postgraduate or undergraduate students 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.)
Early Career Research / Practitioner	Designed to support early career researchers and practitioners by offering a discount on the individual full membership for a period of three years while members transition from study to work. (You will need to apply for Individual membership after three years.)
Retiree	To support individuals who are over the age of 65 and retired from full-time employment, a retiree membership rate is available.
Concession	To support individuals who have an annual income equal to or less than the Australian National Minimum Wage, concession membership is available.

### ▶ ORGANISATIONAL MEMBERSHIPS

Organisational membership is designed to support a range of organisations including companies, academic institutions, foundations, associations and government departments by providing their staff with the opportunity to enjoy the benefits of AAG membership.

There are two types of Organisational membership: 1 - 2 nominated members  
3 - 5 nominated members

## HOW TO JOIN

- ▶ Online at: [www.aag.asn.au/membership](http://www.aag.asn.au/membership)  
or complete the membership form on the back of this page and
  - ▶ Email to: [enquiries@aag.asn.au](mailto:enquiries@aag.asn.au)
  - ▶ Mail to: **Suite 8, 322 St Kilda Road, St Kilda, VIC 3182**
- For more information email [enquiries@aag.asn.au](mailto:enquiries@aag.asn.au) or call +61 3 8506 0525



**AAG**  
Australian  
Association of  
Gerontology

# PLEASE SELECT YOUR CATEGORY OF MEMBERSHIP

Membership valid until 30 June 2022.

Organisational Membership	Total (All prices are GST incl.)
1 to 2 nominated members	\$570
3 to 5 nominated members	\$1099
Printed copy of AJA x 4 (tick this box if you wish to receive print copies of the AJA with your membership.)	\$11

## 2021/22 Membership

Join by Direct Debit and be put in the draw to win...

**1 x Full Conference Registration for the 2021 AAG Conference**

Select the Direct Debit option from the Payment Options below.

### PRIMARY CONTACT

Title:  Mr  Ms  Miss  Mrs  Dr  A/Prof  Prof

First Name

Last Name

Organisation

Position

Address

Suburb

State

Postcode

Phone

Mobile

Email

### PAYMENT OPTIONS

**1. Direct Debit (Please complete the "AAG Direct Debit Application Form" on the next page).**

This option allows your membership fee to be automatically direct debited annually from your nominated credit card. You will be sent an email reminder with a tax invoice and the direct debit due date. You can defer, stop or alter the direct debit at any time.

**2. Credit Card**

VISA  Mastercard

Card Number

Expiry Date

CVV No.

Card Holder's Name

Card Holder's Signature

**3. Electronic Funds Transfer payable to:**

**Account Name:** Australian Association of Gerontology

**BSB:** 083 004

**Account Number:** 8394 38075

**Reference:** Full Name

**4. Cheque payable to:** Australian Association of Gerontology

### CONFIRMATION

I understand the conditions regarding enrolment and payment above.

Signed

Dated

### PRIVACY STATEMENT

Please note that information you provide will be collected for the purposes of processing your membership. The Australian Association of Gerontology may also use this information to provide you with information in relation to other services which may be relevant to you. For more informations visit [aag.asn.au/privacypolicy](http://aag.asn.au/privacypolicy)

### RETURN COMPLETED FORMS TO:

► Email to: [enquiries@aag.asn.au](mailto:enquiries@aag.asn.au)

► Mail to: **Suite 8, 322 St Kilda Road, St Kilda, VIC 3182**

For more information email [enquiries@aag.asn.au](mailto:enquiries@aag.asn.au) or call +61 3 8506 0525



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## SECOND CONTACT DETAILS

Title:  Mr  Ms  Miss  Mrs  Dr  A/Prof  Prof

First Name

Last Name

Position

Phone

Address (If different to primary contact address)

Suburb

State

Postcode

Mobile

Email

## THIRD CONTACT DETAILS

Title:  Mr  Ms  Miss  Mrs  Dr  A/Prof  Prof

Only applicable if 3 - 5 Organisational membership selected

First Name

Last Name

Position

Phone

Address (If different to primary contact address)

Suburb

State

Postcode

Mobile

Email

## FOURTH CONTACT DETAILS

Title:  Mr  Ms  Miss  Mrs  Dr  A/Prof  Prof

Only applicable if 3 - 5 Organisational membership selected

First Name

Last Name

Position

Phone

Address (If different to primary contact address)

Suburb

State

Postcode

Mobile

Email

## FIFTH CONTACT DETAILS

Title:  Mr  Ms  Miss  Mrs  Dr  A/Prof  Prof

Only applicable if 3 - 5 Organisational membership selected

First Name

Last Name

Position

Phone

Address (If different to primary contact address)

Suburb

State

Postcode

Mobile

Email



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## AAG DIRECT DEBIT APPLICATION FORM

This direct debit application is for the customer specified below (You or Your). By signing this direct debit application, You authorise Australian Association of Gerontology Limited ABN 62 162 569 986 (AAG, We, Our or Us) to arrange for the amounts payable by You under the agreement between You and Us to be direct debited by Us from Your nominated account specified below. This direct debit arrangement is governed by the terms and conditions of the direct debit agreement specified below.

## CREDIT CARD DETAILS FOR DIRECT DEBIT OF AAG ANNUAL MEMBERSHIP FEES

Please note: AAG only accepts VISA or MasterCard

Card Type:  Visa  Mastercard

Card Number

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Expiry Date

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CVV No.

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Card Holder's Name

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Card Holder's Signature

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## DIRECT DEBIT SERVICE AGREEMENT

### 1. Our Commitment to You

We will:

- 1.1 arrange for funds to be debited from Your nominated credit card as authorised in the direct debit application;
- 1.2 only arrange for funds to be direct debited from Your nominated account if We have sent You a tax invoice that specifies the amount payable by You and the due date of the direct debit;
- 1.3 if the due date of a direct debit falls on a non-business day, We will draw the amount on the next business day;
- 1.4 give You at least fourteen (14) business days written notice before changing the direct debit drawing arrangement, unless such change is made at Your request; and
- 1.5 keep information pertaining to Your nominated account private and confidential, unless this information is required by Us to investigate a claim made on Us relating to an alleged incorrect direct debit, or as otherwise required by law.

### 2. Your Rights

- 2.1 You may request to defer, stop or alter a direct debit drawing (including the amount and due date) or request to pay only part of the amount payable by giving Us at least fourteen (14) days written notice before the next due date of a direct debit, or through Your financial institution.
- 2.2 You may also cancel Your authority for Us to direct debit Your nominated account at any time by giving Us at least fourteen (14) days written notice before the next due date of a direct debit, or through Your financial institution.
- 2.3 If You believe We have made an error in direct debiting Your nominated account You should in the first instance contact Us to discuss the matter.
- 2.4 If We cannot resolve the matter You can still refer it to Your financial institution who will obtain from You of the disputed transaction and may initiate a direct debit claim.

### 3. Your Commitment to Us

It is Your responsibility to:

- 3.1 ensure that Your nominated credit card can accept direct debits (this may not be available on all cards, please check with Your financial institution);
- 3.2 ensure that Your credit card details are correct by checking them against a recent account statement issued by Your financial institution;
- 3.3 ensure that sufficient clear funds are available on Your nominated credit card to meet the payment of a direct debit drawing on its due date. If there are insufficient funds, You may be charged a fee by Your financial institution;
- 3.4 ensure that the authorisation given to draw on the nominated credit card is identical to the signing instruction held by Your financial institution; and
- 3.5 advise Us immediately if Your nominated credit card is transferred or cancelled.
- 3.6 If there are insufficient clear funds on Your nominated credit card to meet a direct debit drawing or if the direct debit drawing arrangement is varied or cancelled for any reason You must arrange with Us a suitable alternate payment method.

I understand the conditions regarding payment above.

Signed

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Dated

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## RETURN COMPLETED FORMS TO:

- ▶ Email to: [enquiries@aag.asn.au](mailto:enquiries@aag.asn.au)
  - ▶ Mail to: **Suite 8, 322 St Kilda Road, St Kilda, VIC 3182**
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