

**INTERNATIONAL**

**BIOMETRIC**

**SOCIETY**

**International Biometric Society**

### Australasian Region

## ABN 61 424 283 024

**APPLICATION FOR MEMBERSHIP**

#### 

**Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Title** (Prof/Dr/Mr/Ms etc.)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Organization** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Telephone** (please provide at least one number)

Work : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**E-Mail** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MEMBERSHIP CATEGORY**

Please tick

**Regular Member**

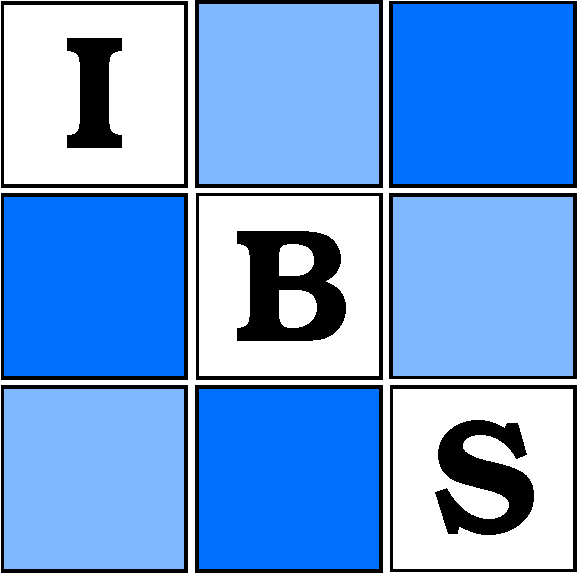
* Electronic access to ‘*Biometrics’, ‘Journal of Agricultural Biological and Environmental Statistics’ (JABES)* and the ‘*Biometric Bulletin’*;
* Option of paying extra to receive paper copies of ‘*Biometrics*’ and/or ‘*JABES*’;
* Voting privileges;
* Right to hold elected office in the society.

**Student Member**

* Electronic access only to ‘*Biometrics’, ‘Journal of Agricultural Biological and Environmental Statistics’ (JABES)* and the ‘*Biometric Bulletin’*;
* Free membership;
* Must have full-time student status confirmed by a member of academic staff from the institution where enrolled;
* No voting privileges or right to hold elected office in the society.

**Signature of Applicant** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Please provide payment details or student declaration on the next page.***



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# INFORMATION FOR 2013

Annual rates for 2013 are

Regular AUD 90.00

Paper copy of journal AUD 12.50

Student Free

**REGULAR MEMBER**

You can pay by cheque, money order, credit card (Mastercard or Visa only) or electronic transfer to the society’s account. No Australian GST is payable as the region is a ‘not-for-profit’ entity with turnover below AUD150,000. All credit card payments will be processed in Australia using the Australian dollar amount and converted, for members outside Australia, to the local currency amount by your financial institution on your card statement.

**Membership details** (please tick):

Membership AUD 90.00

**TOTAL PAID**: AUD ......................

Paper copy of *‘Biometrics’* (tick if required) AUD 12.50

Paper copy of *‘JABES’* (tick if required) AUD 12.50

**Payment method** (please circle) : Cheque / Money order / Credit card / Electronic transfer

**Cheque or money order** : Please make payable to ‘**Biometric Society - Australasian Region’**.

**Credit card details** : Mastercard / Visa

Card Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiry Date \_\_\_\_\_\_\_\_\_\_\_\_

Name on Card \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Electronic transfer** : Bank : Westpac Branch: Petrie Plaza, Canberra, ACT, Australia BSB: 032 – 719 Account No. : 196901 Account Name: Biometric Society Australasian Region Reference: Your name & Membership 2013 Swift code: WPACAU2s

**STUDENT MEMBER**

Please have a member of academic staff at the institution where you are enrolled complete the following

I declare that ……………………………………….. is a full-time student at ...............................................................

Signed ....................................................... Position ...............................................................................

Staff member’s name (PRINT IN CAPITALS): .........................................................................

**Please post or email this completed form and, if applicable, post a cheque or money order to**

Warren Müller Email : warren.muller@internode.on.net

22 McLarty Court Phone : +61 2 62310825 (home)

Kambah ACT 2902, Australia +61 (0)407916868 (mobile)

**If you are concerned about security of information, particularly credit card details, you can give the details to Warren Müller over the phone. We are unable to receive applications by fax.**