

ARLIS/ANZ MEMBERSHIP FORM

ABN 86 155 814 862

Please complete relevant section

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Contact person- Last name: First name:

Job title:

Organisation name:

Additional organisation name:

Address:

State: Country: Postcode: Email:

Work Phone: Fax: Signature:

Personal membership

Last name: First name:

Address:

State: Country: Postcode: Email:

Employer/Institutional Affiliation:

Work Phone: Fax: Signature:

Membership fees

Including subscription to ARLIS/ANZ Journal. Overseas fees include extra postage costs.

Please send me a tax invoice for the membership fee as ticked below

Cheque Bank draft enclosed for the membership fee as ticked below

Australia/International (except New Zealand)

Institutional A\$55

Personal A\$33

Please make cheque or bank draft payable in Australian dollars to ARLIS/ANZ National Executive and send to:

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c/- Logan Hyperdome Library
66-70 Mandew Street
Shailer Park Qld Australia 4128

Phone: +61 7 3412 4122
Fax: +61 7 3801 4074
Email: treasurer@arlis.org.au

New Zealand

Institutional NZ\$55

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Please make cheque or bank draft payable in Australian dollars to ARLIS/ANZ New Zealand Chapter and send to:

Terri Elder
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Te Whare Wananga o Waitaha
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