

ARLIS/ANZ MEMBERSHIP FORM

ABN 86 155 814 862

Please complete relevant section

Institutional membership

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

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:

Paul Reynolds
National Treasurer ARLIS/ANZ
Shaw Research Library
National Gallery of Victoria
PO Box 7259
St Kilda Rd Vic 8004 AUSTRALIA

Tel: +61 3 8620 2256

Fax: +61 3 8620 2555

Email:
Paul.Reynolds@ngv.vic.gov.au

New Zealand

Institutional NZ\$55

Personal NZ\$33

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

Fran McGowan
NZ Treasurer, ARLIS/ANZ
Research and Library Adviser
Ministry for Culture and Heritage
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