

**Application for ASME Membership
Tax Invoice**

**Please complete and return to: ASME Membership, PO Box 141 Mawson, ACT 2607
Fax (61 8) 8125 5749
Email: membership@asme.edu.au
ABN 53 106 346 200**

Title: _____ Family Name: _____ Given Name: _____

Contact Address: _____

State: _____ Postcode: _____ Tel: (____) _____ Mobile: _____

Fax: (____) _____ E-mail: _____

Workplace/Institution: _____

- New Member
- Renewing Member - Membership Number: _____

CONCESSIONAL MEMBER

- Full-time student, ID No: _____ Institution: _____
- Retired

I would like to receive (please tick):

- ASME e-news
- ASME Update electronically
- ISME e-news

TYPE OF MEMBERSHIP

- Full \$75
- Concession \$30 (Full-time students, retirees)

Please indicate your payment method:

- ASME Bank Account: Westpac Bank (Petrie Plaza & City Walk Canberra ACT 2600)
BSB: 732 776 Account Number: 07 0042
*EFT payment-Please indicate your name and membership number in the Description Field
- Cheque payable to ASME Inc.

Or please tick: Mastercard Visa

Credit Card Number:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Name on Card

Expiry Date...../..... Signed:..... Date:.....