



## MEMBERSHIP RENEWAL FORM

January 2009 - December 2009

Due March 31, 2009

email: [ascept@meetingsfirst.com.au](mailto:ascept@meetingsfirst.com.au)

website: [www.ascept.org](http://www.ascept.org)

### Contact details

Name _____	Telephone _____
Job title _____	Fax _____
Institution _____	E-mail _____
Address _____	
_____	
_____	Year highest degree awarded _____
City _____ State _____ Postcode _____	Honours Masters PhD (please circle one)
Country _____	Include details on ASCEPT website? Yes <input type="checkbox"/> No <input type="checkbox"/>

### Member information and interests

General	Research	Education	Clinical	Other Societies
<input checked="" type="checkbox"/> Please tick <input type="checkbox"/> Subscribe to ASCEPT e-news <input type="checkbox"/> Main focus pharmacology <input type="checkbox"/> Main focus toxicology <input type="checkbox"/> Equal focus on both pharmacology and toxicology <input type="checkbox"/> Available for consultancy? Expertise in _____?	Please list your research interests	Please list areas of teaching	Please list your clinical interests	Please list other memberships

#### Special interest groups (SIG)

Please tick all SIGs you wish to be a member of

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> Education        | <input type="checkbox"/> Clinical pharmacology/therapeutics         | <input type="checkbox"/> Pharmacogenomics | <input type="checkbox"/> Toxicology     |
| <input type="checkbox"/> Drug Disposition | <input type="checkbox"/> Urogenital & Gastrointestinal Pharmacology | <input type="checkbox"/> Drug Discovery   | <input type="checkbox"/> Cardiovascular |

### Annual Subscription

All payments must be made in Australian dollars. If payment is made by bank transfer, all fees must be paid by the remitter.

	Australia	Overseas		*Includes GST
Member	<input type="checkbox"/> \$110.00*	<input type="checkbox"/> \$100.00		
Student member	<input type="checkbox"/> \$38.50*	<input type="checkbox"/> \$35.00	If student, what year will your course finish? _____	

<input checked="" type="checkbox"/>	Cheque (AUD) to Meetings First enclosed	<input checked="" type="checkbox"/>	Please charge this credit card AUD
	Direct deposit made on ___/___/09	Card type	Expiry
	Account name: Meetings First Bank: National Australia Bank Account No: 083 153 45 648 5990 Reference: ASCEPT – insert surname	Number	
		Name	
		Signature	
		Cardholder Email	

### TAX INVOICE

This notice becomes a Tax Invoice on receipt of payment – please keep a copy.  
 This Tax Invoice has been issued by Meetings First on behalf of ASCEPT (ABN 78 008 461 354)

#### ASCEPT Secretariat and conference organiser – Meetings First

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 Meetings First is a registered business name of Turner Seabrook Pty Ltd 51 059 443 097

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