



**MEMBERSHIP / RENEWAL of MEMBERSHIP of ASSOCIATION
LAM AUSTRALIA RESEARCH ALLIANCE**

I wish to:

- (a) *be admitted as a member of LAM Australia*
- (b) *renew my annual membership of LAM Australia (no seconder required)*

In the event of my being admitted as a member, I agree to be bound by the rules of the Association in force for the time being. I consent to being contacted by the state or national representative of LAM Australia from time to time.

_____ TITLE FULL NAME OF APPLICANT (BLOCK LETTERS)

of _____
POSTAL ADDRESS

_____ SUBURB STATE POSTCODE DATE OF BIRTH

_____ TEL (H/W) MOBILE EMAIL

_____ SIGNED BY APPLICANT DATE

IN SUPPORT OF NEW MEMBERSHIP

I support this application for membership

_____ NAME OF MEMBER

_____ SIGNATURE OF MEMBER DATE

Annual membership is renewable at the start of each calendar year.

The membership fee of \$5 per calendar year may be remitted as postage stamps or by EFT to LAM Australia Research Alliance, ANZ account #012 055 4926 67193. If paying by EFT, please identify your payment.

Payment remitted by: EFT stamps (circle one)