



THE ROYAL SOCIETY OF NEW SOUTH WALES

Founded in 1821. Incorporated by Act of Parliament in 1881
Australia's first Society dedicated to the promotion of Science, Art and Philosophy

POSTAL: BUILDING H47, UNIVERSITY OF SYDNEY, NSW 2006
Tel: (02) 9036 5282 ♦ Fax: 9036 5309

Email: info@nsw.royalsoc.org.au
Web page: <http://nsw.royalsoc.org.au>

ABN 76 470 896 415

Membership Application Certificate

Section A: To be completed by the applicant

NAME IN FULL (Please Print)		TITLE
QUALIFICATION OR OCCUPATION (Degrees, if any)		
ADDRESS POSTCODE	Tel (H):	
	Tel (W):	
	Fax:	
	Mobile:	
	Email:	
I acknowledge that regular communication from the Society will be via email unless I have ticked this box: <input type="checkbox"/> mail		

Branch Affiliation:	<input type="checkbox"/> None required <input type="checkbox"/> Southern Highlands <input type="checkbox"/> Orange- Central West
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UNDERTAKING

I, the undersigned, do hereby engage that I will endeavour to promote the interests and welfare of THE ROYAL SOCIETY OF NEW SOUTH WALES, and to observe the Rules and By-Laws as long as I shall remain a member thereof. A copy of the Rules and By-Laws can be obtained by visiting the Society's web page on: http://nsw.royalsoc.org.au/society.html	
Signed:	Date:

The 2010 annual subscriptions are shown below. Please tick the appropriate box.

<input type="checkbox"/> Full Member within Australia \$101.50 (incl. GST)	<input type="checkbox"/> Full Member outside Australia \$98.00 (no GST)
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Payment options (Tick one)

<input type="checkbox"/> Cheque attached <input type="checkbox"/> Money order attached <input type="checkbox"/> Other	<input type="checkbox"/> Electronic Transfer BSB: 062 031 Account Number: 009 000 43 Account Name: Royal Society of NSW Reference: your Surname Date of this transfer: .../.../.....
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Section B: To be completed by the office

We the undersigned Members of the Society propose and recommend the above candidate as a proper person for admission into The Royal Society of New South Wales as a Member thereof:	
Proposing Member's Details Member Number: Name Printed: Members Signature: Date:	Seconding Member's Details Member Number: Name Printed: Members Signature: Date:
Certificate received by:	Date certificate received:
Member accepted by Council on:	Member accepted by OGM on:
Payment details:	New Member number: