

MEMBERSHIP RENEWAL/APPLICATION FORM

(Financial year 2018/2019)

PERSONAL DETAILS			
Name:			
Address:			
Email:	Phone:	Mob	ile:
Please tick this box for your email address to be added to the almalink email group			
Field of Medical Practice: University (if student): Please indicate your preferred level of confidentiality. (Where 1 = totally confidential, 2 = out to ALMA members, and 3 = out to public)			
PAYMENT STRUCTURE (Choose from Standard OR Precious Stone Memberships*)			
Standard: \$150.00 or Students/Retiree		ALMA will a	cretionary rate: \$ccept any nominated fee above \$5 from r who has difficulty paying the standard
ALMA Precious Stone Membership:			
Opal Member:	\$250.00	Precious Stone Members may use the tick boxes below to allocate their funds to projects of their choice	
	4070.00	DocLIST: \$	
Topaz Member:	\$350.00	Lesbian Health Promotion & Research: \$	
Amethyst Member: \$500.00		Students and Doctors in hardship fund for annual ALMA conference attendance: \$	
Diamond Member: \$(nominated fee above \$500.00)		ALMA General Funds: \$	
		☐ International Issues & Human Rights Committee: \$	
())))	,	For a nominated purpor Please specify:	se: \$
PAYMENT OPTIONS			
Total Payment Amount: \$			
OPTION 1:DIRECT DEBIT	OPTION 2:DIRECT DEPO	OSIT OPTION 2: BPAY	OPTION 4: POSTAL
Complete the ALMA Direct Debit Request Form and you will never have to fill out another ALMA membership form again!	Account name: ALMA BSB: 032 505 Account no: 309288 Reference: (Your unique ALM membership number)	For info: www.bpay.cor Biller Code: 585828 Ref: (your unique ALMA membership number)	n.au Please tick if a cheque or money order is attached to this form and will be sent to the address at the bottom of this form.
the Direct Debit Option, I	mbership of ALMA in accordan request ALMA to arrange for fu pecified schedule in the attached	nds to be debited from my no	
Signature:	Date:		
The Precious Stone tiered Membe	arshin structure allows your tota	Il financial contribution to ALM	IA to be entirely tax deductible as it

Once completed, please send this form to Admin Assistant, Gail Sheehan by email (admin@almas.org.au), post (ALMA Accounts, PO Box 256, South West Rocks, NSW 2431), or fax (02 6566-6679)

a membership fee. This is in response to members' suggestion and agreement at the 2012 AGM