



Tax invoice – Health Libraries Inc. – ABN: 71 676 326 573

Membership Form – all sections must be completed

ABN 71 676 326 573

✓ New []

✓ Individual or Corporate [] []

Organisation/Workplace: _____

Name: _____

Address: _____

Suburb State Postcode Country

Postal address: _____ (if different from above)

Phone (H) () _____ (W) () _____ (Mob) _____

Fax() _____ Email: _____

Position title & NUC symbol (where applicable) _____

Membership declaration:

- In the event of my admission and renewal as a member, I agree to abide by the rules of the Association.
I agree to Health Libraries Inc. keeping a confidential record of the above details for administrative purposes.
Corporate Membership
One nominated company representative may vote at meetings of Health Libraries Inc.
One nominated company representative may attend Health Libraries Inc functions at the member rate.

Signature of Applicant

Date

MEMBERSHIP CATEGORIES table with columns for category and AUD\$ amount. Includes rows for New member joining fee, Individual membership/renewal, Corporate membership/renewal, International membership/renewal, GST not required, Total payment, and e.g. examples.

Membership renewals fall due on June 30 each year and will lapse where subscriptions are not renewed within 3 months.
First-time members joining between 1st February and 30th May will be due for their first renewal due on June 30 of the following year.

HLinc Annual Conference
To attend the conference at member rates, membership fees must be paid before you register to attend the conference.

Membership forms are available from the HLinc website www.vicnet.net.au/~hlinec
Committee member contacts, events to be held, details of past events, conference matters and other useful links also found here.

Payment options on next page

Please tick the payment type you elected to use:

Cheque	Money Order	Direct Credit
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Payment by Cheque / Money Order Make payable to: **Health Libraries Inc**

Cheque/Money Order must be sent with the completed and signed renewal form.

Multiple renewals may be paid with one Cheque/Money Order and **must** include a completed and signed renewal form for each member.

Please write on each form the cheque/money order number.

Payment by Direct Credit using an internet banking facility.

Payment to be made to the following ANZ Bank Account:

BSB No.: **013 395**

Account No.: **258361137**

Your payment **must** be coded, according to your membership category and **surname**, in the Payee Reference/Description field. (See codes below) E.g. MR-Goldsmith

This information is vital for your payment to be accepted.

THIS TRANSACTION WILL CONSTITUTE A RECEIPT – THIS SIGNED FORM MUST BE SENT BY MAIL/FAX OR EMAIL TO COMPLETE YOUR REGISTRATION

NM = New Member

MR = Member Renewal

NC = New Corporate Member

CR = Corporate Renewal

NI = New International Member

IR = International Renewal

Receipt/Transaction number for this payment from your internet banking process

On receipt of payment and completed/signed form, all members will receive a membership card, which will contain a member number and the membership period. The membership number should then be used when booking of all HLInc events.

Send payment(s) AND forms to:

**Treasurer
Health Libraries Inc.
Dianne Jones
18 Mountview Avenue
PARKDALE VIC 3195**

HLInc Admin Area Only

Form received

Cheque

Money Order

Direct Credit

Member Number:

Email to: diannej2@optusnet.com.au

Phone: 0419521391 Fax: 03 9587 3235