Association for Tertiary Education Management Inc

MEMBERSHIP RENEWAL FORM (New Zealand)

INVOICE

Please complete the form, enter payment details and mail or fax to the ATEM office (see below for contact details).

New Zealand Applicants

Mail the application form with your cheque to:

ATEM Inc
PO Box 6050
O'Connor ACT 2602
Australia

If paying by credit card, fax the form back to
+61 2 6125 5262

Personal details

Title: _____ Given Names: _____Family Name: _____

Position Title: _____Department: _____

❑ Please tick if you wish to be included as a voting member in the Maori Caucus, which elects a member of the Branch Committee.

Institution and address

Institution: _____

Postal address: _____ Post code_____

Contact details

Phone (work): _____ Fax (work): _____

Email Address: _____

Consent to publish

I consent to publishing my details in the following directories on the Web Site:

❑ Experts' Directory (in the open part of the site) ❑ Members' Directory (in the 'members only' part of the site)

❑ I do not consent to publish in either directory

Payment details and subscription rates (in NZ Dollars)

	Student Member	Member	Associate Fellow	Fellow
Individual	64	128	186	233
Corporate*	N/A	Fee free	58	105
Emeritus	N/A	64	93	116.50

* The amounts shown for Corporate Members are for the individual concerned. The Institution has already paid the base fee of 'Member', so it falls to the Member to pay the remainder**.** ATEM is not registered for payment of GST in New Zealand.

Payment

Cheque payment for the amount of: ☐ Card type: ☐ Visa ☐ Mastercard ☐ Bankcard

Credit Card payment for the amount of: ☐ Amex ☐ Diners

Card Expiry Date: ☐☐☐☐ Card Number: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Card Holder's Name (as it appears on the card): ☐

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