

Application for Ordinary Membership

Australian College of Rural & Remote Medicine

WORLD LEADERS IN RURAL PRACTICE



2017-2018

Membership category

General Practitioner Specialist Practitioner Academic Specialty? _____

Membership level (for explanations, please see panel below)

Full time Registrar Resident or intern
 Part time Joint(couples) International
 IMG on Specialist Pathway

Identity

Title: _____ First name: _____ Other name/s: _____

Family name: _____ Preferred name: _____

Date of birth: DD/MM/YYYY Gender: Female I am Aboriginal
 Male Torres Strait Islander

Primary mailing address

Street address: _____ Town or Suburb: _____

State: _____ Postcode: _____ Country: _____

Phone: _____ Mobile: _____ Fax: _____

Email: _____

Secondary mailing address

Workplace name: _____

Street address: _____ Town or Suburb: _____

State: _____ Postcode: _____ Country: _____ Fax: _____

Phone: _____ Mobile: _____ Email: _____

Medical registration

Medical registration number: _____

Verified by ACRRM officer:

Signature _____ Date _____

Membership Fees **

- | | |
|---------------------------------------|--|
| Full-time: \$1,190.00 | You are a medical practitioner or academic working more than 20 hours per week |
| Joint (couples): \$935.00 each | You and your partner are both current practitioners (total for couple = \$1,890) |
| Part-time: \$720.00 | You are a practitioner or academic who works less than 20 hours per week |
| Group practice: \$1090.00 | You work in a practice with at least two other practitioner members of ACRRM |

**Fees are full year to 30 June 2018. Pro rata rates available for part year

