

Special Interest Group Membership Application Form



Please indicate which Special Interest Group/s you wish to join:

Acute Pain	History of Anaesthesia
Airway Management	Medical Education
Anaesthesia and Critical Care in Unusual Transport Environments	Neuroanaesthesia
Leadership and Management	Obstetric Anaesthesia
Cardiac Thoracic Vascular and Perfusion	Perioperative Medicine
Communications in Anaesthesia	Regional Anaesthesia
Day Care Anaesthesia	Rural
Diving and Hyperbaric Medicine	Trauma
	Welfare of Anaesthetists

Membership Type

Membership is of two types; please indicate the type applied for:

Member/Trainee: (Fellows of ANZCA, or ordinary members of the ASA or NZSA)

Please indicate your affiliation/s:

Fellow of ANZCA

Ordinary Member of ASA

Ordinary Member of NZSA

Please note: As Special Interest Groups (SIGs) are managed by ACE (a tripartite of ANZCA, ASA and the NZSA), as a SIG member you may receive information from all three organisations.

Associate Member:

People with special interests, who are not eligible to be full members. These may include Associate Members of the ASA or NZSA; Allied health professionals or members of other related professional organisations. Associate members require endorsement from the SIG executive committee.

Details of Applicant

Prefix: _____ First Name: _____ Surname: _____

Hospital: _____

Preferred mailing address

Please indicate if this is: Home Work

City: _____ State: _____ Postcode: _____

Country: _____ Mobile: _____

Email: _____

Email or mail to:

ANZCA

Email: events@anzca.edu.au

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630 St Kilda Road, Melbourne VIC 3004, Australia.

Tel: +61 3 9510 6299 Fax: +61 3 9510 6786

Or

ASA

Maxine Wade

Email: mwade@asa.org.au

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PO Box 6278, North Sydney, NSW 2059, Australia.

Tel: +61 2 8556 9726 Fax: +61 2 8556 9750