

# INTERNAL MEDICINE SOCIETY OF AUSTRALIA & NEW ZEALAND

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## APPLICATION FORM - ASSOCIATE MEMBERSHIP – NEW ZEALAND

Please complete and return to the above address with brief resume and membership fee of AUSTRALIAN DOLLARS \$55.00

Date: \_\_\_\_\_ Advanced Trainee: 1<sup>st</sup> year / 2<sup>nd</sup> year / 3<sup>rd</sup> year (please circle)

Surname: \_\_\_\_\_ Given Names: \_\_\_\_\_

Preferred Title: \_\_\_\_\_ Current Position: \_\_\_\_\_

Work Address: \_\_\_\_\_

Home Address: \_\_\_\_\_

Preferred mailing address: \_\_\_\_\_ Work / Home (please circle)

Telephone: Work: ( ) \_\_\_\_\_ Home: ( ) \_\_\_\_\_

Mobile: \_\_\_\_\_

Facsimile: Work: ( ) \_\_\_\_\_ Home: ( ) \_\_\_\_\_

Email: Work: \_\_\_\_\_

Home: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: Male / Female (Please circle)

Qualifications: \_\_\_\_\_

Institutions of Affiliation: \_\_\_\_\_

Details of Current Practice/Sub-specialties/Professional Interest: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

- I enclose my cheque for **AUD\$55** membership fee (please ensure cheque is in Australian Dollars)  
 I wish to pay **AUD\$55** by credit card (please complete the following)

Name of Cardholder (as recorded on card): \_\_\_\_\_

Card Number \_\_\_\_\_

Expiry date \_\_\_\_\_ Visa / Mastercard (Please circle)

Signature: \_\_\_\_\_

**Please note, this section MUST BE COMPLETED BY EACH MEMBER as a National Legislative requirement.**

## **THE PRIVACY AMENDMENT (PRIVATE SECTOR) ACT 2001**

The IMSANZ complies with the National Privacy Legislation, which came into effect on 21 December 2001. In accordance with the Society's privacy policy (*please refer to the IMSANZ website [www.racp.edu.au/imsanz](http://www.racp.edu.au/imsanz) or the November newsletter for details*) please complete the following:

- I authorise** my contact details, ie work address, telephone number, fax number and email address to be published in any 'Directory of Members' distributed to IMSANZ members and related third parties only or as available in our Members only section of our website.
- I do not authorise** my contact details, ie work address, telephone number, fax number and email address to be published in the 'Directory of Members' distributed to IMSANZ members and related third parties only.

I agree that this authorisation can be changed by me at any time, but only with my written authority.

Signature of Member \_\_\_\_\_

## **PRIVACY POLICY 2001**

The IMSANZ complies with the new national privacy legislation, *Privacy Amendment (Private Sector) Act 2001*, effective 21 December, 2001.

Personal information about members, as defined by the Act, must be accurate, complete and up-to-date and may only be disclosed to other members and related third parties, if the Member has authorised the IMSANZ to do so and only for the purpose covered by the authority given. All personal information, as defined by the privacy legislation, supplied to the IMSANZ will be treated in accordance with the National Privacy Principles and only shared with related or third parties in accordance with those principles.

Such authorisation must be given in writing and remains while the member is an 'Active Member' or the authority is revoked, in writing, by that member.

**IMSANZ members may check the accuracy of, and update, their personal details at any time**, however identity must be verified by providing IMSANZ staff with the member's date of birth and middle name.

The IMSANZ requires third parties who request personal information to apply in writing, stating the purpose for which it is to be used and to declare that it too has a compliant privacy policy. Each request is assessed, and if it is judged to be of value to Members, it may be acceded to.

For further details please refer to the IMSANZ Privacy statement on the web at [www.imsanz.org.au](http://www.imsanz.org.au) or in the November 2001 newsletter. If you require the complete policy document please email the secretariat on [imsanz@racp.edu.au](mailto:imsanz@racp.edu.au) for a copy.

**Alasdair MacDonald**  
**President IMSANZ**

**Nick Buckmaster**  
**Hon Secretary**