# APPLICATION FOR ADMISSION TO MEMBERSHIP OF THE FACULTY OF TRAVEL MEDICINE OF THE AUSTRALASIAN COLLEGE OF TROPICAL MEDICINE

(INCLUDING THE SUB-FACULTY OF EXPEDITION MEDICINE)

## DETAILS

Title

Surname

Given Names

Preferred Name

Current Position

Current Employer

Work Address

Postcode City

Country

Home Address

Postcode City

Country

Tel

Fax

Mobile

Email

Website

## COLLEGE MEMBERSHIP STATUS

☐ I am a member of The Australasian College of Tropical Medicine

☐ I wish to apply for membership of the College (you should complete a College membership application form). Applicants must be current members of the College or apply for membership (at least at Affiliate level) of the College.

## FACULTY OF TRAVEL MEDICINE MEMBERSHIP

I wish to apply for membership of the Faculty of Travel Medicine at the level of:

☐ Fellow of the Faculty

☐ Associate Fellow of the Faculty and to be considered for Fellowship by:

- ☐ A) Pass in an examination of a thesis by three referees, comprising evidence of published and unpublished work relating to travel medicine, with a 1,000 word summary indicating how this work contributes to the discipline of travel medicine, +/- viva examination.
- ☐ B) Pass in a written and / or oral examination in travel medicine approved by the Faculty.

☐ Associate Fellow of the Faculty

☐ Member of the Faculty

☐ Associate of the Faculty

☐ I am seeking endorsement in Expedition Medicine

## NOMINATOR / REFEREE

Full Name of Nominator / Referee

Signature

Date

Full Name of Seconder / Referee

Signature

Date

☐ Enclose the required supporting documentation, including a full curriculum vitae.

☐ Enclose references from referees unless appropriately nominated and seconded.

☐ Enclose the required application fee.

Applicants Signature

Date

## SUBSCRIPTION FEES (as at 16 November 2009)

Subscription fees for the Faculty are set by the College Executive Council. Same schedule of fees applies for the endorsement in Expedition Medicine.

| | |
|---|---|
| Application fee | $70 + $7GST = $77 |
| Associate Fellow, Member & Associate | $70 + $7 GST = $77 |
| Fellow | $100 + $10 GST = $110 |
| Life Membership | $1200 + $120 GST = $1320 |
| Pro-Rata Life Membership | Five Annual Installments of $300 + $30 GST = $330 |

N.B. Only one application fee is required if applying for both FTM and FTM (Exped. Med.)

**(All Australian applicants to pay GST)**

## PAYMENT DETAILS

☐ Enclosed cheque or money order in Australian dollars.

☐ Credit card

☐ Mastercard ☐ Visa ☐ Bankcard

Card#: ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐

Expiry date: ☐☐ / ☐☐

Name on card:

Signature of cardholder:

**Please forward completed application form, accompanying documentation and payment to:**

**The ACTM Secretariat, PO Box 123, Red Hill Qld 4059**
**Tel: +61 7 3872 2246 • Fax: +61 3856 4727**
**Email: actm@tropmed.org**