



DAY SURGERY SPECIAL INTEREST GROUP

(A.N.F. Victoria)

ABN 24 023 651 263

DSSIG MEMBERSHIP FORM

REGARDLESS OF DATE OF JOINING ALL MEMBERSHIP FEES WILL BE RENEWABLE IN AUGUST

Please forward to

DSSIG Treasurer/Committee Assistant,

41 Exner Drive, Dandenong 3175 or Fax: 03 9706 8430 or email: dssigmembership@adsna.info

Receipts will be issued when your application has been processed

New Member

Renewal

PLEASE PRINT CLEARLY

Name		
Place of Employment:		
Postal Address:		
Phone: (AH)	(BH)	(Mobile)
Email Address:		

MEMBERSHIP FEES	
(ANF) Full Members	\$55
(Non ANF) Assoc. Members	\$65
Overseas Members	\$A70

Cheques/Money Orders Payable to Day Surgery Special Interest Group

Credit Card Mastercard Visa

Card No. ____/____/____ Expiry Date ____/____

Name On Card _____ Amount _____ (+5% surcharge for credit card only)

Cardholder's Signature _____ Date _____

Office use only		
<input type="checkbox"/> New Members Pack	<input type="checkbox"/> Mailing list	Receipt No: _____
		Date Issued: _____