

Australian Association for Professional and Applied Ethics Inc.

ABN 91 541 307 476

<http://aapae.org.au>

RENEWAL / APPLICATION FOR MEMBERSHIP – 2020-21⁽¹⁾

Please **email** or post your completed form to the AAPAE Secretary

Postal address: AAPAE, C/- GPO Box 1692, Melbourne VIC 3001

Email: info@aapae.org.au Tel: +61 (0) 7 3735 5189

Name: _____ Title: _____

Postal address: _____

_____ Postcode: _____

Organisation: _____

If Institutional Membership, name of contact person: _____

Telephone: (1) _____ (2) _____

Email address: _____

I apply to **become a member / renew my membership** (cross out as applicable) of the Australian Association for Professional and Applied Ethics Inc., and agree to be bound by the constitution of the Association. I have provided evidence of my strong interest in professional or applied ethics (**new members only**), as noted on the back of this form (interest may be evidenced by way of qualifications, experience, publications, conference participation, or through any other endeavour that requires the application or knowledge of professional or applied ethics).

Signature of applicant: _____ **Date:** _____

I enclose payment of:

A\$90 Individual⁽³⁾ or **A\$25** Concession^{(2), (3)} or **A\$200** Institutional⁽³⁾

Please note that from 2016 onwards, individual and concessional members may purchase a hardcopy of the *REIO* Conference Proceedings volume direct from Emerald Group Publishing at a 30% discount. Please email info@aapae.org.au for further details.

Electronic funds transfer (EFT)

Account name: **Australian Association for Professional and Applied Ethics**

BSB: 063 408 Account number: 10018617 SWIFT code: CTBAU2S (for international bank transfers)

I enclose a Cheque / Bank Draft (in Australian dollars), payable to:

Australian Association for Professional and Applied Ethics

Mastercard / Visa

Card no: _____ Exp. Date: ____ / ____

Cardholder's name: _____

Signature: _____ Date: _____

(1) Membership covers the period from 1 April to 31 March and includes entitlement to receive the AAPAE's bi-annual newsletter, *Australian Ethics*, and a reduced registration rate for the Annual Conference.

(2) Students and others entitled to concessions.

(3) As the AAPAE is not registered for Goods and Services Tax (GST), GST is not levied on membership fees.

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For **NEW MEMBERS**, please complete the following sections.

For **RENEWING MEMBERS**, please only complete if you wish to update your details/change your preferences.

Evidence of my strong interest in professional or applied ethics

I [including an institutional entity] confirm my strong interest in professional or applied ethics (interest may be evidenced by way of qualifications, experience, publications, conference participation, or through any other endeavour that requires the application or knowledge of professional or applied ethics):

Member directory information

The AAPAE maintains a directory of members. The intention is that this directory will be made available to members and others (upon request only) to provide networking opportunities. Please include here only such information as you wish to make available to others in the membership directory.

Same as overleaf

Name: _____ Title: _____

Qualifications: _____

Position: _____

Organisation: _____

Telephone: (1) _____ (2) _____

Email address: _____

Please include my email address on the AAPAE's distribution list.

Speaker requests

I am willing to consider requests from organisations for the AAPAE to provide a speaker on topics in professional and applied ethics (your personal details will not be made available to others, other than the AAPAE Committee members, without your specific approval). My preferred topics include:

For office use only

Proposer: _____ Seconder: _____

Date admitted to membership: _____

The AAPAE respects and protects the privacy of its members, and is bound by the provisions of the *Privacy Act 1988 (Cth)*, including the Australian Privacy Principles.