

## POSTGRADUATE STUDENT

Membership period: fixed from 1 January – 31 December each year. Pro rata membership is not available.

If you wish to change categories this year please contact the Secretariat on (02) 6230 0346 to confirm your eligibility.

### BASIC DETAILS

Title	
Last Name/s	
First Name/s	
Date of Birth (DD/MM/YYYY)	
Gender	
ICOM number	

### UNIVERSITY/EDUCATIONAL INSTITUTION DETAILS

Degree type (PhD, Masters etc)	
Topic/area of study	
Certifying authority/institution name	
Institution type	
Expected end date	
Street address	
Suburb or town	
State or territory	
Postcode	
Institutional email (if applicable)	
Institutional landline (if applicable)	

### PERSONAL CONTACT DETAILS

<i>Stickers go to this address each year – please update – otherwise your sticker may not reach you</i>	
Street address/PO Box	
Suburb or town	
State or Territory	
Postcode	
Email	
Landline	
Mobile	

<b>PREFERRED EMAIL FOR CORRESPONDENCE</b>	
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**MANDATORY DECLARATION** By providing this information and paying the membership fee, you assure ICOM that you are not a person:

- that trades (i.e. buys or sells for profit) cultural property - including works of art and natural and scientific specimens - taking national laws and international conventions into consideration
- who would engage in an activity that conflicts with ICOM's ethical standards (see <http://icom.museum/ethics.html>).

**INTERNATIONAL COMMITTEE YOU WISH TO JOIN:**

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For a list of current international committees see <http://icom.museum/the-committees/international-committees/>.

**PAYMENT**

Please note: ICOM is not registered for GST and prices given do not include GST and payments are processed by Museums Galleries Australia

	<b>Cost of subscription</b>	<b>Cost of subscription with MGA discount</b>
Regular Individual:	\$62.00	\$58.90
ICOM Australia and Museums Galleries Australia offer a 5 % discount for reciprocal membership. Use MGA membership number to claim discount. <b>Museums Galleries Australia Membership no:</b> _____		
<b>Payment calculation:</b>	Membership fee	\$ _____
	Donation	\$ _____
	Total payment	\$ _____

**Method of payment**

**EFT (electronic funds transfer from bank account)**

BSB: 062 900 A/C number: 10216161  
A/C Name: Museums Australia  
Reference: \_\_\_\_\_

Please use: ICOM [your surname] [your ICOM number] with no spaces - for example  
ICOMSMITH22233

**Cheque**

Payable to: ICOM Australia  
Send with form to: ICOM Australia PO Box 24, WEST DEAKIN ACT 2600

**Credit card** Name on card: \_\_\_\_\_

Credit Card number: \_\_\_\_\_ Expiry: \_\_\_\_\_

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

**WHAT TO DO WITH THE FORM**

Mail as hard copy to: ICOM Australia, PO Box 24, WEST DEAKIN ACT 2600

Email scans of the form and other documents: [info@icom.org.au](mailto:info@icom.org.au)

For telephone enquiries: (02) 6230 0346

For the statutes which govern ICOM's membership program:

[http://icom.museum/fileadmin/user\\_upload/pdf/Statuts/2017\\_ICOM\\_Statutes\\_EN.pdf](http://icom.museum/fileadmin/user_upload/pdf/Statuts/2017_ICOM_Statutes_EN.pdf)

For policies governing the collection, use and disclosure of members' personal information:

[www.icom.org.au/policiesprivacy.php](http://www.icom.org.au/policiesprivacy.php)