

INDIVIDUAL SUPPORTING MUSEUMS OR GALLERIES

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

Payments are processed by the Secretariat (Australian Museums and Galleries Association). They can be reached on 02 6230 0346

To be eligible you must be able to demonstrate you provide substantial financial or other support to ICOM because of an interest in museums and international co-operation between museums. Supporting members are not eligible for regular membership.

Please attach a statement describing how you provide substantial financial or other support to ICOM.

BASIC DETAILS

Title	
Last name/s	
First name/s	
Date of birth (DD/MM/YYYY)	
Gender	

PERSONAL CONTACT DETAILS

Stickers will be sent to this address each year - please update – otherwise your sticker may not reach you

Street address/PO Box	
Suburb or town	
State or territory	
Postcode	
Email	
Landline	
Mobile	

PREFERRED EMAIL FOR CORRESPONDENCE

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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. Payments are processed by the Secretariat: Australian Museums and Galleries Association (AMaGA)

Cost of subscription

Supporting Member: \$440.00

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Payment calculation:	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: Australian Museums and Galleries Association

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

Cheque

Payable to: ICOM Australia

Send 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: members@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

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

www.icom.org.au/policiesprivacy.php