

# Trainee Membership Application Form



## The ASA vision and mission

The ASA vision is to **support, represent** and **educate** our members to enable the provision of the safest anaesthesia to the community.

The ASA mission is to enable medical practitioners in the specialty of anaesthesia to achieve best practice in the following:

- Safe, high quality patient care,
- Engagement in planning and delivering health care services,
- Compliance with professional obligations,
- Continuing Medical Education, research and publications,
- Personal health and welfare,
- Leading advocacy on economic, industrial and workplace issues,
- Preservation of the history of the specialty.

## Trainee Membership

The following persons are qualified to apply for Trainee Membership:

- Medical graduates in pre-vocational medical education and training with an interest in pursuing a career in anaesthesia or
- Medical practitioners who are training to become anaesthetists and who are registered with the Australian and New Zealand College of Anaesthetists (ANZCA).

The trainee categories available are outlined below:

Training level                      Medical graduate (e.g. intern/RMO)

FANZCA year                        PMET

Annual membership rate        is complimentary

FANZCA year                        Introductory Training or  
Basic Training

Annual membership rate        is complimentary

FANZCA year                        Advanced Training or  
Provisional Fellowship Training

Annual membership rate        30% of Ordinary member rate

## Benefits of Membership

Once membership is approved, Trainees automatically join the ASA Trainee Members Group whose mission is to represent and promote the interests of trainee members of the ASA in Australia and internationally. As a Trainee member, you will be entitled to a range of benefits, outlined below:

- *Anaesthesia and Intensive Care Journal*.
- *Australian Anaesthetist Magazine*.
- Advanced Trainees receive a copy of the *Anaesthetic Crisis Manual*.
- Complimentary Part 0 & Part III courses for registrars.
- Reduced registration fees to the National Scientific Congress (NSC).
- ASA Advanced/Provisional Fellow Trainees or first year Ordinary members may claim one complimentary NSC/CSC registration (excludes travel, accommodation, sundry expenses, supplementary activities and workshops) once they have been a paid member for at least two years.

## How to apply for membership

### Online

You can complete your application form online via our website at [www.asa.org.au](http://www.asa.org.au) – simply click on the **Membership Tab** and then choose **'How to Join'** from the drop down menu and follow the prompts to apply online.

### Hardcopy

Complete the form overleaf and return to the ASA for processing:

Email: [membership@asa.org.au](mailto:membership@asa.org.au)

Mail: PO Box 76, St Leonards NSW 1590, Australia

### Proposer

Your application must be proposed by an ASA Ordinary Member. **However if you do not know an ASA Ordinary Member please tick the relevant box and leave section blank.**

Your application will be acknowledged upon receipt by our Membership team. The application will then be forwarded to the relevant State Chair and then to the Membership Application Committee for approval. Applications are generally approved in 3 business days.

# Trainee Membership Application Form



## Section 1 – Personal & Contact Details

Title: \_\_\_\_\_ Family name: \_\_\_\_\_ Given names: \_\_\_\_\_  
Date of birth (DD/MM/YYYY): \_\_\_\_\_ Gender:  Female  Male  Non-binary Nationality:  Indigenous Australian  Other  
Address: \_\_\_\_\_  
Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_ Country: \_\_\_\_\_  
Email address (a valid email address is required to receive e-news broadcasts) \_\_\_\_\_  
Mobile: \_\_\_\_\_  
 Do not display details (unless indicated in the 'Do not display details' box, your full name, state of residency and membership category details will be published in the ASA magazine)

## Section 2 – Membership Details

I would like to apply for (please specify year and complete relevant details):  
 PMET Basic training commencement date: (DD/MM/YY): \_\_\_\_\_  
 Introductory / Basic Trainee Advanced training commencement date (DD/MM/YY): \_\_\_\_\_  
Please note: Basic Trainees will be automatically transferred to the next level of training (i.e. I-BT transfers to A-PFT) two years from your basic training commencement date. If your studies have been extended or deferred, contact the ASA at [membership@asa.org.au](mailto:membership@asa.org.au) so we may amend our records.  
 Advanced / Provisional Fellow Trainee Expected completion date for training (DD/MM/YY): \_\_\_\_\_  
Advanced Trainees will automatically be transferred to Ordinary membership upon successful admission to ANZCA Fellowship.

## Section 3 – Tertiary Qualifications My qualifications are on AHPRA. AHPRA Medical Registration No: \_\_\_\_\_

Qualifications	University	Year of graduation

## Section 4 – Employment Details

Hospital	Position	Start date	Finish date
			Current

## Section 5 – Proposer Details. Please print name and sign

- Don't know an ASA Ordinary member?** Please leave blank and the Membership Services Team will request the State Chair to nominate on your behalf.  
 I, being an Ordinary member of the Australian Society of Anaesthetists, propose the applicant be granted membership of the ASA.

Proposer's name: \_\_\_\_\_  
Proposer's signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Section 6 – Applicant's Declaration. Please print name and sign

I declare that the information given in this application is true and correct. I agree to abide by the ASA's Constitution & Bylaws.

Applicant's name: \_\_\_\_\_ Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

ASA office use only (sign and date)	Privacy
Membership _____ Date _____	The Australian Society of Anaesthetists (ASA) collects your personal information so that we can properly represent the economic, workforce and professional interests of Australian anaesthetists. The ASA will take reasonable steps to keep your information secure and confidential, and will not, except as required by law, disclose your personal information to third parties without your consent. The ASA respects your right to access your personal information and encourages you to contact us, should you wish to amend, change or otherwise advise the ASA about the use of your personal information. Further advice about personal information can be found on the Office of the Australian Information Commissioner website at: <a href="http://www.oaic.gov.au">www.oaic.gov.au</a>
State Secretary _____ Date _____	
CEO _____ Date _____	