

## Australian Anthroposophic Medicine Association Inc.

Application to the Admissions Board for Membership of the Australian
Anthroposophic Medicine Association

AAMA aims to be an inclusive organisation catering to all interested in human well-being.

MEMBERSHIP (from the Constitution Clause 3, amended 11th October 2008) Categories of Membership

3.1 There will be the following categories of membership:

Professional Practitioner Member, General Member, Student member and Mailing List.

## 3.1.1 Professional Member:

Professional Membership is available to those who belong to an Australian or New Zealand external registration body - thus having professional negligence insurance plus recognition, and

- a) have completed a recognized Anthroposophic therapy/medical training; or
- b) have taken a path of study and personal development in anthroposophic medicine as shown by 1. providing a biography to the Accrediting Committee,
  - 2. presentation of two (2) case studies or
- c) have attended a training which is not "recognized". Then either the individual and/or the training seeks recognition with the Medical Section, or the individual seeks acknowledgement for professional membership from AAMA.
- d) each application shall be accompanied by references from two (2) active practitioners in anthroposophic medicine.
- 3.1.2 **General Member**: Any allied health or medical practitioner practicing out of anthroposophic principles but does not qualify to be a professional member or is interested in knowing more about anthroposophic medicine.
- 3.1.3 **Student Member**: Student membership will be available for those applicants who may be in an Anthroposophic or another medical/allied health practitioner training, or who wishes to support or connect with the work of the AAMA.
- 3.1.4 Mailing List: To receive AAMA member emails and other notices.
- 3.1.5 The AAMA board will have final discretion regarding all membership applications.

## FEES:

The financial year is from 1st July to 30th June. Members joining between 1st January and 30th June pay half the membership fee.

Professional Member fee \$120 Member \$100

Student Member \$35 Mailing list \$25

If you wish to apply to the Admissions Board for Membership of the Australian Anthroposophic Medicine Association Inc as a:

Professional Member/Member/Student Member/Mailing List
Member (please fill in the appropriate membership form below).

All members email addresses will be included in the international Medical Section database unless AAMA is specifically requested to withhold this. (indicate on your application form.

## Professional Membership

I wish to apply to the Admissions Board for Membership of the Australian Anthroposophic Medicine Association Inc as a Professional Member (from the Constitution Clause 3, amended 23<sup>rd</sup> September 2007)

Name:	
Address:	
Tel: BH	АН
Mobile:	
Email:	
The Association constitution require practitioners in anthroposophic medic	s you to have references from two (2) active cine.
Referee's names	
$\square$ I have attached references from	n two referees.
Qualifications:	
Your Occupation:	
Your Practice Address (if different f	rom home address)
Relevant Certificates/Diplomas (title: Professional Association you are a me	·
* * * * * * * * * * * * * * * * * * * *	cations (both mainstream and anthroposophic), e for an accredited organisation (eg ATMS, or

The financial year is from 1st July to 30th June. (Pro rata rates from January  $1^{st}$  to June  $30^{th}$ ). Fee \$120 (\$60)

Nurses Registration Board).

All financial members will be listed in the next Directory unless the AAMA is otherwise notified.		
$\ \square$ I do not wish to be listed in the next on-line Directory		
All correspondence will be sent via email		
All members email addresses will be included in the international Medical Section database unless AAMA is specifically requested to withhold this.		
$\square$ I do not wish for my details to be on the international database.		
PAYMENT:		
☐ I have electronically deposited \$ to A.A.M.A.'s bank account, National Bank BSB 082 309 Account number 650152022, on / include your name.  *Fees will be returned if professional membership application is not accepted.		
Please scan and send to: membership@aamaanthro.com		
Signed:		



I wish to apply to the Admissions Board for Membership of the Australian Anthroposophic Medicine Association Inc. as a General member \$100, Student member \$35 or mailing list member \$25

Title
NameSurname
Date of birth
Address
STATEPC
Mobile
Email
The Association constitution requires you to have a sponsor who is an active practitioner of anthroposophic medicine, is an existing member of the AAMA, or the Anthroposophical Society of Australia.
Sponsor's name
Sponsor's
Signaturedatedate
Sponsor's Occupation
I have electronically deposited \$ to A.A.M.A.'s bank account, National Bank BSB 082 309 Account number 650152022, on / (include your name.)
*Fees will be returned if membership application is not accepted. All correspondence will be sent via email.
*Fees will be returned if membership application is not accepted.  All correspondence will be sent via email.  Signed:
All correspondence will be sent via email.
All correspondence will be sent via email.  Signed:  Date: / /  All members email addresses will be included in the international Medical Section