



Australian Men's Health Forum

MEMBERSHIP FORM

The Australian Men's Health Forum is the peak body for men's health in Australia, representing a diverse network of individuals and organisations working together to tackle the social factors that shape men and boys' health. Become a member of AMHF and support our work to get Australia talking about men's health issues.

Together, we can create a healthier future for men and boys, and a healthier future for everyone.

BENEFITS

Communication: get the latest news, research and information on the social factors that shape men and boys' health and help us raise awareness of men's health issues.

Consultation: make sure your voice is heard as we work to influence policy and practice through our community consultations, conversations with members and campaign work.

Collaboration: connect with like-minded people and help us improve the way the health service works for men and boys, by joining one of our special interest groups.

Connection: stay informed about men's health events throughout the year and let others know what you're up to through our website, newsletter and social media channels.

MEMBERSHIP FORM TAX INVOICE

MEMBERSHIP TYPE (GST inclusive)

- | | |
|--|-----------------|
| <input type="checkbox"/> Organisation (Staff) | \$100.00 |
| <input type="checkbox"/> Organisation (No Staff) | \$70.00 |
| <input type="checkbox"/> Individual Membership | \$40.00 |
| <input type="checkbox"/> Associate Membership
<small>Commonwealth or State Government</small> | \$75.00 |
| <input type="checkbox"/> Concession
<small>Full-time student or Health Care card-holder</small> | \$10.00 |

MAKE YOUR PAYMENT TO:

Account Name: Australian Men's Health Forum

BSB number: 062-595

Account Number: 1018 3938

Reference: Please email completed form and proof of payment to sharon@amhf.org.au or post to the address below.

MEMBER DETAILS

Name: _____

Job Title: _____

Organisation: _____

Postal Address: _____

Town: _____

State: _____

Postcode: _____

Phone: _____

Mobile: _____

Email: _____

Signature: _____ Date: _____

Upon receipt of payment, this membership form becomes a Tax Invoice.