



Australian Space Research Institute Ltd

ABN 62 051 850 563

ASRI MEMBERSHIP APPLICATION/RENEWAL FORM

New application or **Renewal** [insert 'N' or 'R']

Address Change required: [insert new address below otherwise leave blank]

Fee

Full Member	\$80
Student / Concession	\$50
Corporate	\$200

Total

Name:

Organization: _____ (corporate members)

Address:

E-mail [MOST IMPORTANT]:

Phone (BH): _____ Phone (AH): _____

Payment method: Cheque / Bankcard / Mastercard / Visa (please indicate)

Card Holders Name: _____ (please print)

Card Number: _____ Expiry: ____ / ____

Signature: _____ Date: ____ / ____ / ____

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