



# MEMBERSHIP APPLICATION FORM

for the year 1 July 2019 – 30 June 2020 (NOTE: If joining after 1 January, fees reduce by 50%)

I hereby apply to become a member of the Association of Consulting Structural Engineers, Victoria.

First name / Surname: .....

Company: .....

Mailing address: .....

Suburb: ..... Post code: .....

Phone number: ..... Mobile: .....

Email: (TO ENSURE YOU RECEIVE COMMUNICATIONS FROM US) .....

If my application is successful, I hereby agree to be bound by the rules of the Association for the duration of my membership. A copy of the relevant Rules will be sent by email to all new members. It is a requirement that applicants for the grade of **MEMBER** are currently practising in the field of Structural Engineering and are eligible for membership of the College of Structural Engineers, Engineers Australia, or that they are Registered as a Building Practitioner (EC) in Victoria.

## MEMBERSHIP GRADES

Please nominate membership grade :

- |                                    |          |   |          |
|------------------------------------|----------|---|----------|
| <input type="checkbox"/> MEMBER    | \$185.00 | <input type="checkbox"/> MEMBER (Country)           | \$145.00 |
| <input type="checkbox"/> ASSOCIATE | \$185.00 | <input type="checkbox"/> ASSOCIATE (Country)        | \$145.00 |
| <input type="checkbox"/> RETIRED   | \$70.00  | <input type="checkbox"/> GRADUATE (6 years or less) | \$90.00  |
| <input type="checkbox"/> STUDENT   | NIL      | <input type="checkbox"/> LIFE MEMBER                | NIL      |

### Payment:

This entire form must be mailed to: **ACSEV Treasurer**  
5 Rose Ave  
SURREY HILLS, VIC, 3127

Or email to:  
**treasurer@acsev.org.au**

Tick method of payment as below:

- Cheque or money order**, made payable to ACSEV. Include with completed form.
- Electronic Funds Transfer**. Association of Consulting Structural Engineers, Vic.  
BSB 033 050 Account No. 220141 Include your name as a reference.
- Credit card**. Visacard, Mastercard, AMEX. **Pay in person** at monthly technical meeting, & submit form.  
Or complete form below and return to treasurer – see above details.

CARD HOLDER NAME: .....

CARD NUMBER:

EXPIRY DATE:  /  CVV:

**NOTE - ACSEV is not GST registered. A Tax Invoice will not be issued.**

Signature of Applicant: ..... Date: .....

For enquiries regarding membership, contact the Membership Officer:  
Francis Hsieh T: 9511 4763 E: [fristalone@optusnet.com.au](mailto:fristalone@optusnet.com.au)