

Please write clearly.

ASIAN PACIFIC ENDODONTIC CONFEDERATION

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APPLICATION FORM FOR NEW MEMBERSHIP 2013-2015

Current details:
lame:(Title, Given Name(s), Family Name)
Address:
elephone:(Country Code, Local Code, Your Number)
-mail:

Please note:

For individual applicants, the one of following evidences must be included with this application:

- 1. Your practice consists of endodontics for at least 50% of their clinical time;
- 2. You are conducting, or have conducted, research in the field of endodontics, or have published scientific papers in dental journals in the field of endodontics;

or

3. You have received advanced education of at least two (2) years in the field of endodontics and have received a certificate of completion from an institution recognised by the government dental registration authority.

<u>For Society/Association members</u>, your application for membership must be accompanied by appropriate documentation to certify the recognition, accreditation or affiliation with that country's national dental or government body/agency.



SUBSCRIPTION FORM 2013-2015

Subscriptions are for the **2 year period** - please tick box to indicate the fee you are paying:

1. Country Association / Society membership:				
- For national or local endodontic associations / societies with:				
a) Up to 100 members	\$	AUD 115.00		
b) 100 - 200 members	\$	AUD 220.00		
c) More than 200 member	rs \$	AUD 335.00		
2. Individual Members	\$	S AUD 30.00		
PAYMENT METHODS (ALL PAYMENTS MUST BE IN AUSTRALIAN DOLLARS)				
 By Bank Cheque or International Bank Draft made payable to: The Asian Pacific Endodontic Confederation. Please return this form and your payment by AIR MAIL to the above address IMMEDIATELY. 				
Electronic/automatic bank transfers can be made to our bank account held at the:				
National Australia Bank - Dandenong Branch (Bank Branch No. 083 214) 311 Lonsdale Street, DANDENONG, Victoria 3175 Australia.				
	t name is: Asian Pacific En t number is: 083 214 69 7		ation	
If you choose this form of transfer: please complete the attached form, tick this box : and mail it with a copy of your bank's receipt immediately to the APEC Treasurer.				

Ref: APEC/Application13