



Rural Doctors Association Victoria Application for Membership

ABN: 83 096 669 680

Please send completed application to:

RDAV Memberships, PO Box 3636, Manuka ACT 2603

Name: _____

Spouse Name: _____

Address – Business: _____

Postcode: _____ Phone: _____ Fax: _____

Email: _____

Address – Private: _____

Postcode: _____ Phone: _____ Fax: _____

Is your partner registered with the Rural Medical Family Network Yes No

Would you like to be involved in the RDAV Board of Management Yes No

Work description: Please tick the appropriate box(es)

Rural GP

Proceduralist - Obstetrics Surgery Anaesthetics

Are you a specialist? Speciality _____

Annual Subscription – Membership is from 1st July to 30th June – All fees are inclusive of GST			
Standard Membership	\$360.00	International Medical Graduate – first year	Free
		2 nd year on until fellowship	\$250
Group Practice (per doctor)*	\$330.00	*(Group practice membership applies to each doctor in a group practice where all the doctors are members of RDAV - please photocopy this application form and complete one for each doctor.)	
Doctor Spouse (per doctor)	\$195.00		
Part-time GP (less than 5 sessions per week)	\$195.00		
GP Registrar – First Year Free then	\$240.00	Student	\$22.00
Practice Manager	\$130.00	Student Members of Rural Clubs	Free

Enclosed is my: cheque/money order for AUD \$ _____

For secure credit card payment go to www.rdaa.com.au then Quick Info, subscription payments
Use your **surname and first initial** as the customer reference number

To pay by EFT: BSB: 032727 Acct No: 174788
Description: **surname and first initial**

Please retain a copy for your records. A tax invoice will be forwarded to you on receipt of payment.

Please post to : RDAV Membership, PO Box 3636 Manuka ACT 2603 or Fax to : 02 6260 7551