

## APPLICATION FORM – AMSRS MEMBERSHIP UPGRADE

To upgrade your current Associate membership to Full level, please complete this application form and forward along with any supporting documentation required. Your application will be acknowledged by email, and sent to the local Divisional Committee for further processing. There is no need to pay the differential between Associate and Full membership fees until your next membership subscription renewal date, however a one-off Upgrade Application Fee of \$27.50 (incl GST) is to be paid on application.

Applications and payment details may be sent to us by mail, fax or email to:

**By mail to:**  
 Membership  
 Australian Market & Social Research Society  
 Level 1, 3 Queen Street  
 Glebe NSW 2037

**By fax to:** (02) 9571 5944  
**By email to:** membership@amsrs.com.au

### UPGRADE APPLICATION FEE & PAYMENT DETAILS

Name: \_\_\_\_\_ Organisation: \_\_\_\_\_

Upgrade Application Fee = **\$ 27.50** (incl GST)

**Payment Details:** Date Paid: ..... / ..... / .....

Paid by:  Cheque  Paid by EFT BSB: 062 217 Acct No: 0080 3399 Acct Name: AMSRS

Please charge to:  Mastercard  Visa  Amex\*  Diners\*  
\* NB: 3% surcharge applies for Amex or Diners

Card number:

Name on card: ..... Expiry date:   /

Signature: .....

Please send me a receipt after my payment has been banked.

**Payment is not enclosed.** Please instead send a Tax Invoice for the upgrade fee, made out to:

.....

**Enquiries:** Tel: (02) 9566 3100 or 1300 364 832  
 Email: membership@amsrs.com.au  
 Website: www.amsrs.com.au  
 ABN: 19 002 882 635

## AMSRs MEMBERSHIP UPGRADE

### I am an Associate member and wish to apply for upgrade to Full membership

AMSRs Membership Number: ..... Dr/Mr/Ms/Mrs/Miss/Other .....

Preferred First Name: ..... Last Name: .....

Formal Name (for your Full membership certificate): .....

### CURRENT CONTACT DETAILS *(If the details we already have on file for you are correct, you can skip this section)*

Organisation: ..... Department: .....

Postal Address: ..... Postcode: .....

Alternate Addr: ..... Postcode: .....

Tel (work): ..... Fax (work): ..... Mobile: .....

Tel (home): ..... Fax (home): .....

Email (1): ..... Email (2): .....

Please do NOT send me information about upcoming AMSRS events and industry news by email.

### EMPLOYMENT *(Please show details of relevant positions held in support of the minimum experience requirement)*

Current Position: ..... Date Appointed: / /

Responsibilities: .....

Reporting to: ..... Tel:.....

Previous Position: ..... Held from: / to /

Organisation: ..... Reporting to: .....

Previous Position: ..... Held from: / to /

Organisation: ..... Reporting to: .....

Previous Position: ..... Held from: / to /

Organisation: ..... Reporting to: .....

### EDUCATION *(Please enclose a copy of a degree certificate or academic transcript – unless applying under Option B)*

Qualification: .....

Institution: ..... Year Awarded: .....

Qualification: .....

Institution: ..... Year Awarded: .....

Qualification: .....

Institution: ..... Year Awarded: .....

## AMSRS MEMBERSHIP UPGRADE

### I am applying for upgrade to Full membership under Option A:

I hold a University degree (in any field), or the Certificate in or Diploma of Market Research. I also meet the following three requirements:

- 1)  a. Have a minimum of two years sole or directly delegated responsibility for commissioning or planning research and for presenting and interpreting results,  
or  b. Have exercised full time supervisory responsibility for at least two years (eg fieldwork, coding, statistics),  
or  c. Have a minimum of two years responsibility for instruction in the techniques and application of market, economic or social research at a tertiary institution.
- 2) Enclose a copy of my degree certificate or academic transcript with my application (this **must be** supplied).
- 3) Have the support of a Nominator and a Seconder, who have signed below. The Nominator must be a Full member or Fellow of the Society. If no other AMSRS member is known to you, the Seconder may be a business referee.

**Nominator:** I, (print name) ..... declare that to the best of my knowledge this information is true and correct. Signature: ..... Date: ..... Tel: .....

**Seconder:** I, (print name) ..... declare that to the best of my knowledge this information is true and correct. Signature: ..... Date: ..... Tel: .....

### I am applying for upgrade to Full membership under Option B:

I do not hold a tertiary qualification and am applying as a person of merit in the industry, to be judged by the AMSRS National Council. I also meet the following three requirements:

- 1)  a. Have a minimum of five years sole or directly delegated responsibility for commissioning or planning research and for presenting and interpreting results,  
or  b. Have exercised full time supervisory responsibility for at least five years (eg fieldwork, coding, statistics),  
or  c. Have a minimum of five years responsibility for instruction in the techniques and application of market, economic or social research at a tertiary institution.
- 2) Enclose brief supporting documentation outlining the required minimum **five** years experience.
- 3) Have the support of a Nominator and Seconder, who have signed below. The Nominator and Seconder must **BOTH** be Full members or Fellows of the Society.

**Nominator:** I, (print name) ..... declare that to the best of my knowledge this information is true and correct. Signature: ..... Date: ..... Tel: .....

**Seconder:** I, (print name) ..... declare that to the best of my knowledge this information is true and correct. Signature: ..... Date: ..... Tel: .....

### PROFESSIONAL BEHAVIOUR AGREEMENT

I have read and fully understood the AMSRS *Code of Professional Behaviour* and maintain my undertaking to conform to the *Code* and agree to be bound by the AMSRS Constitution and By-Laws and any other relevant rules of the Society. I understand that, if found guilty of any breach of the AMSRS *Code of Professional Behaviour*, my name and details of the breach may be published in an AMSRS publication.

I, (print name) ....., declare that to the best of my knowledge, the information contained in this application is true and correct.

Signature: ..... Date: .....

### PRIVACY STATEMENT (Please refer to our website [www.amsrs.com.au](http://www.amsrs.com.au) for the complete AMSRS Privacy Statement.)

We collect and hold your personal information in order to provide you with member services. Your personal information is only disclosed to outside organisations in order to provide these services to you. Your name, company name & membership level will be listed on our website. We do not provide mailing lists to external parties for their advertising purposes. We do, however, mail third party information for a fee. Monies raised in this way go towards improving member services and are a small but important part of the Society's revenue base. You are entitled to request a copy of your membership record at any time.