



Physiological Society of New Zealand Inc. Application for Enrolment as a Member

Name in Full: (Surname first)

Phone No.

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Address: (work)

Fax No.

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Email:

Applying for:

Full Membership

Student Membership

Position Title (See list for IUPS position codes)

Date and Place of Birth

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Earned Degrees or Other Academic Qualifications (State University, major subject, date of graduation; See list for IUPS degree codes)

Suggested Biographical Codes

Earned Degree Codes (D)

Code Description

- 01 Ph.D. or Dr. Phil
- 03 M.D. or Dr. Med.
- 05 D.V.M. or Dr. Vet.
- 07 D.D.S., D. Odont or D.O.
- 08 B.S. or B.Sc.
- 09 M.S. or M.Sc.
- 10 ED.D. or Dr. Ed.
- 11 Ph.D. Student
- 13 Med. Student
- 15 Vet. Student
- 19 M.S. Student

Position Title Codes (T)

- A. Director
- B. Chairman
- C. Professor
- D. Research Associate
- E. Senior Research Associate
- F. Associate Professor
- H. Laboratory Director
- L. Institute Director
- Z. Other

Speciality Codes (S)

- 01. Anaesthesia
- 02. Anatomy and Embryology
- 03. Anthropology
- 04. Biochemistry
- 05. Biophysics
- 06. Biomedical Engineering
- 07. Blood
- 08. Cardiovascular
- 09. Cellular and Tissue
- 10. Comparative Physiology
- 11. Electrolytes and Water Balance
- 12. Endocrines
- 13. Energy Metabolism & Temperature Regulation
- 14. Environmental
- 15. Enzymes
- 16. Gastrointestinal
- 17. General Physiology
- 18. Gerontology
- 19. Immunology
- 20. Liver and Bile
- 21. Lipids and Steroids
- 22. Microbiology
- 23. Minerals, Bone and Teeth
- 24. Muscle and Exercise
- 25. Neuroscience
- 26. Nutrition and Food
- 27. Pathology
- 28. Pharmacology
- 29. Radiation
- 30. Renal
- 31. Reproduction
- 32. Respiration

Major Physiological Interests (See list for IUPS speciality codes)

Proposed by (PSNZ member)

<i>Signature</i>	<i>Print Name</i>

Seconded by (PSNZ member)

<i>Signature</i>	<i>Print Name</i>

If elected I agree to abide by the rules and regulations of the Physiological Society of New Zealand.

<i>Signature</i>	<i>Date</i>

- Subscriptions are payable at the time of application (currently \$75 p.a. Full Member, \$20 p.a. Student Member).
- Student membership is only available to those enrolled for a degree/diploma at a tertiary institution who, if part-time, must not be in receipt of a salary greater than \$20,000 p.a.
- **Note: Membership is authorised once a year at the AGM.**

Student Status Certification

I certify that during 2011/12 the above individual will have full-time student status

X _____
 Supervisor's signature Printed Name Institution/Department

PSNZ is a Registered Incorporated Society, Organisation Number 226365 and a 'charitable entity', Registration Number CC29495.

**Return to the Treasurer: Associate Professor Ian LeGrice
 Department of Physiology, University of Auckland, Private Bag 92019, Auckland 1142**

Payment Information

Payment by cheque

Please make cheques payable to: **PSNZ**

Send the completed Membership Renewal form and cheque to:

**Associate Professor Ian LeGrice
PSNZ Treasurer
Department of Physiology
University of Auckland
Private Bag 92019
Auckland Mail Centre
Auckland 1142**

Payment on-line

If you have access to an “on-line” banking you may wish to use this facility to pay directly. The Society bank account details are:

**Account holder: Physiological Society of New Zealand
Bank: Bank of New Zealand
Account number: 02-0908-0234587-25**

Please:

- (i) Indicate on the transaction, from whom the payment is being made.
- (ii) Inform the Treasurer (i.legrice@auckland.ac.nz) that you have made the electronic payment.
- (iii) Return the completed Membership Renewal form to the Treasurer either by email or post.

Best wishes,



**Associate Professor Ian LeGrice
Treasurer**
