

SALARIED MEMBERS ORDER FORM

Membership No: _____

Name: _____

Address: _____

Phone No: _____

Fax No: _____

Email: _____

(PLEASE PRINT CLEARLY).

Practicing Status: Full-time / Part-time.

(Please Circle)

Discipline: _____

How Employed: Salaried – Federal / State / Non-Government; with Private Practice rights; Fee for Services; Sessional; Private Practice; Other _____

Employed As: _____

(e.g. GP, Specialist, Staff Specialist).

I would like a copy of the 1 January 2012 AMA List of Medical Services and Fees.

YES/NO (please mark). **Do not send payment with your order, a Tax invoice will be sent.**

Format required: Book (1st free / additional copy \$51); or

CD – 1 January 2012 \$51

(mark whichever is applicable)

Number of Copies required: [] Booklet [] CD

Please Note: The 1 January 2012 AMA List of Medical Services and Fees is also available free for download, via the secure members area of the AMA website (www.ama.com.au/memberservices). If you already have a username and password go to User Login (located on the right hand side) and follow the prompts. If you don't, email your full name, State and unique email address, to membership@ama.com.au and a username and password will be forwarded to you. Alternatively, please call 1300 133 655.

Fax back to Marcin Zygmunt at (02) 6270 5499