Membership Upgrade Please complete form in BLOCK LETTERS. Payment **must** accompany form.



Personal Details	Payment
If you are not a current financial member, you need to renew or re-instate your membership before completing this form.	My fee is included with this form and will be paid by
Your Master ID (if you do not know your Master ID please find it at www.anziif.com)	Employer Self Other (please specify)
	,, <u> </u>
Given Name Middle Name	Payment Details (Membership will not be processed without payment details)
	OR By phone with credit card details. (+61 3) 9613 7280 or NZ Toll Free 0800 103 675
Family Many	OR Please debit my Credit Card (please tick)
Family Name	Amex Mastercard Visa
	Card Number
Date of Birth	
/ / 1 9 Y Y	Name on Credit Card Expiry Date
Mobile Business Phone	
	Signature of Cardholder
Email	Signature of Cardinotal
Enall	
	Australia New Zealand International Int. Emerging Markets
Business Name	A \$55 NZ \$60 A \$50 A \$35
	*New Zealand residents pay in New Zealand dollars only.
For all Fellowship CIP Criteria	
The table found at www.anziif.com outlines how to become a Fellow and the Fellowship Passport points	OR My membership fee will be paid by (please tick):
allocation system. A total of 100 points and a minimum of two years' insurance/finance industry work experience are required to be eligible for election to Fellowship, demonstrated by a letter from	Cheque / Bankdraft Enclosed, OR
your employer.	Bank Transfer (Date of transfer) / / 2 0 Y Y
Applicants will be required to supply certified documentation supporting their application. Demonstrating a course has been satisfactorily completed. A certified copy is a photocopy of the original document with	For Australian and International For New Zealand
the signature and official stamp of an appropriate authority, e.g. solicitor, principal, doctor, police officer, indicating that they have sighted the original. A photocopy or fax of a certified copy is not acceptable.	Students/ Members: Students/Members: Bank Name: NAB Bank Name: NAB
	BSB: 083-004 BSB:020-500
Membership for Overseas Qualified Insurance Professionals ANZIIF offers membership arrangements for graduates with overseas qualifications. The Overseas	Account Number: 515117195 Account Number: 0550383025
Qualification Table found at www.anziif.com/overseasmembership lists all of the existing ANZIIF	Swift Code: NATAAU3303M Swift Code: BNZNZNZ22
membership arrangements for overseas graduates. Applicants will be required to supply certified documentation supporting their application. Demonstrating	Cheques to be made payable to Australian and New Zealand Institute of Insurance and Finance.
a course has been satisfactorily completed. A certified copy is a photocopy of the original document with the signature and official stamp of an appropriate authority, e.g. solicitor, principal, doctor, police officer,	Bank transfers often incur bank fees. Please ensure these fees are accounted for in your transfer.
indicating that they have sighted the original. A photocopy or fax of a certified copy is not acceptable.	The amount paid is inclusive of GST for Australian members. For overseas members (other than New Zooland), the membership rate has been edited and appears in Australian dellars. Membership
	Zealand) the membership rate has been adjusted and appears in Australian dollars. Membership fees are normally tax deductible. This document will be a tax invoice when completed and payment
Membership for Australia and New Zealand Insurance Professionals	is received.
If you have completed the ANZIIF examinations please provide the title of the ANZIIF course here:	Privacy Statement
	The Australian and New Zealand Institute of Insurance and Finance (ANZIIF) collects and stores your
Membership Upgrade Fees	personal information for the purposes of providing membership services, providing education and training programs, improving and promoting products and services, meeting education regulatory
Being duly qualified, I hereby make an upgrade application for my name to be submitted to the Board	reporting and compliance requirements, and promoting your membership status in various ways. For full details of our Privacy Policy refer to our website www.anziif.com/privacy. ANZIIF produces lists of
of the Australian and New Zealand Institute of Insurance an Finance for election as	members and CIPs to promote membership/CIP status for circulation within the insurance industry and
CIP Membership Levels - Please tick the level you are applying for.	in ANZIIF publications (including in the Journal and on the ANZIIF website). Please indicate if you do not wish to have your name included on such lists by emailing customerservice@anziif.com
Level Post Nominal	Many employers support their staff membership. ANZIIF on occasions is asked to supply membership details to employers. Please indicate if you do not wish to have your results released to your employer by
Fellow ANZIIF (Fellow) CIP	emailing customerservice@anziif.com, quoting your Master ID and advising that you do not agree to the
Senior Associate ANZIIF (Snr Assoc) CIP	ANZIIF releasing your results to your membership details to your employer this year. All ANZIIF members are bound by the ANZIIF's Constitution and Regulations and Code of Ethics and
Associate ANZIIF (Assoc) CIP	Standards of Professional Conduct. These can be accessed at www.anzifi.com. Payment of the annual membership fees implies agreement to abiding by these ANZIIF membership requirements.
Affiliate ANZIIF (Aff) CIP	membership rees implies agreement to abiding by these Arazin membership requirements.
If you are not a current financial member, you need to renew or re-instate your membership before	Declaration
completing this form. All Membership fees are non-refundable.	I declare that to the best of my knowledge the information supplied in this form is correct and complete. I acknowledge that the provision of incorrect information or documentation relating to my membership
All membership less are non-returnable.	may result in withdrawal of my membership, at the discretion of ANZIIF. I agree to abide by ANZIIF's
	Constitution and Regulations and Code of Ethics and Standards of Professional Conduct.
	Signature Date
	Please return this completed membership form with correct fee to the Australian and New Zealand Institute of Insurance and Finance.
	Mail to: Email:
	Level 7, 628 Bourke Street customerservice@anziif.com Melbourne VIC 3000
	Australia
	This acts as a tax invoice upon payment of the fee. ABN 56 004 320 076
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