

## Application for Membership

### Victorian Vascular Nurses Special Interest Group (VVNSIG)



I, \_\_\_\_\_ (Insert your name here)

Desire to become an active member / associate member (*Circle appropriate option*)  
of the Victorian Vascular Nurses Special Interest Group.

In the event of my admission as a member, I agree to be bound by the rules of the association for the time being in force.

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Personal Contact address: \_\_\_\_\_

Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_ email: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile: \_\_\_\_\_

Employer: \_\_\_\_\_ Unit: \_\_\_\_\_ Designation: \_\_\_\_\_

Professional Contact details: \_\_\_\_\_

Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_ email: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile: \_\_\_\_\_

#### **VVNSIG Membership**

**Annual fees currently \$50**

*(Includes free education sessions 4 x year & ANZSVN membership)*

**Payment is by:** Cheque/Money Order/Cash (in person)  
Direct Deposit – email to [vvnsig@gmail.com](mailto:vvnsig@gmail.com) for details

**Payment details:** Please make cheques payable to V.V.N.S.I.G.

**Payment advice:** Cash  Cheque  Money Order  (*please tick*)

**Please forward to:**

*Henry Holman,  
23 Wellington Street,  
West Footscray VIC 3012*

#### **Office Use Only**

(ABN: \_\_\_\_\_)

**Cheque Details:**

**Bank** \_\_\_\_\_

**Cheque No:** \_\_\_\_\_

**Membership No:** \_\_\_\_\_

The VVNSIG is open to any health professionals with an interest in vascular nursing and its associated fields as an active, associate or trade member. Active members are registered with the Nurses Board as either a Division 1 or 2 Registered Nurse. Associate members are non-nurses who have an interest in supporting the purpose of the group.

Membership provides you:

- Free attendance to 4 education sessions annually at a variety of hospitals around Melbourne.
- Networking opportunities with other health professionals who share an interest/knowledge in vascular management
- Active members are eligible to vote at the AGM, hold office and serve as a committee member.
- Membership to the ANZSVN (Australian & New Zealand Society for Vascular Nurses) see [www.anzsvn.org.au](http://www.anzsvn.org.au)

Please feel free to contact [vvnsig@gmail.com](mailto:vvnsig@gmail.com) or one of our committee members if you require further information or assistance

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Bridget Laird	<a href="mailto:btlaird@mac.com">btlaird@mac.com</a>
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Pat Ko	<a href="mailto:pei-heng.ko@austin.org.au">pei-heng.ko@austin.org.au</a>
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