

Australasian eResearch Organisations (AeRO)

Please read the **AeRO Membership Agreement** before completing this form.

Full name of Applicant	
If Applicant is not a legal/standalone entity, full name of legal entity representing the Applicant, and ABN	
Nature of Applicant's role in the research and education sector	
Number of eResearch support staff at Applicant (staff includes contractors, secondees, interns, etc. 'eResearch support' defined broadly)	
Membership Type	Full Member Associate Member
Postal Address of Applicant	
Name of person authorised by the Applicant to act on its behalf on matters relating to AeRO	
Title of authorised person	
Contact detail for authorised person	Phone number:
	Email address:
Declaration fadmitted to AeRO, I agree that my organisation wing egreement as amended from time to time.	II be bound by the AeRO Membership
(Full name and title of person authorised by th	ne Applicant)
(Signature and Date)	

Please submit your completed form to AeRO CEO - Sam Moskwa - sam@aero.edu.au

ADVOCATE COLLABORATE COMMUNICATE www.aero.edu.au