HEAL Membership form

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| **Name** | First name  Surname |
| **Job title/Primary affiliation**  *If applicable* |  |
| **Email address** |  |
| **Do you identify as Aboriginal and/or Torres Strait Islander?** | Yes  No  Prefer not to say |
| **Location** | Australian Capital Territory  New South Wales  Northern Territory  Queensland  South Australia  Tasmania  Victoria  Western Australia  Other (please specify) |
| **Organisation** | University/Research Organisation (please specify)  Aboriginal/Torres Strait Islander Community Organisation (please specify)  Government Organisation (please specify)  Community Group (please specify)  Non-Governmental Organisation (NGO) (please specify)  Private Business (please specify)  Other (please specify) |
| **Expertise/Interest**  *Tick all that apply* | Indigenous Knowledge Systems  Advocacy/Community  At-risk Populations & Life Course Solutions  Biosecurity & Emergency Infectious Diseases  Bushfires, Air Pollution & Extreme Events  Data & Decision Support Systems  Food, Soil & Water Security  Health System Resilience & Sustainability  Urban Health & Built Environment  Rural & Remote Health  Science Communication  Other (please specify) |
| **Membership type**  *Please tick* | **HEAL Affiliate Member** I would like to actively participate as a researcher, health or environmental practitioner, policymaker, advocate, or community member to the HEAL Network. I would also like to receive all information sent by the HEAL Network, including funding and job opportunities, invitations to conferences and events, and newsletters. |
| **Terms and conditions** | The HEAL Network is inclusive and open to researchers, policy makers, health and environmental professionals, Indigenous and other community groups, charities and businesses that meet its vision and principles. As such:   * Members will engage with the HEAL Network and its investigators, support staff, and other members in a respectful manner. * The HEAL Network will collect, manage, and safeguard your personal information in a responsible manner, and it will not sell or disclose your personal details to another party. The HEAL Network will only use your information for evaluation, research and reporting, and care will be taken to properly de-identify your information during this process; * You will only be contacted in the manner specified in your selected membership type and you can cancel your membership to the HEAL Network at any time; * The HEAL Network reserves the right to accept or deny membership applications, and to terminate your membership if you fail to adhere to these terms and conditions |