



Electrical and Electronic Engineering
Society of Adelaide University

Membership Form

Title: Mr Mrs Ms Other: _____

Name: _____
FIRST/GIVEN NAME MIDDLE NAME(S) FAMILY/SURNAME

Date of Birth: ____/____/____
DAY MONTH YEAR

Student Number: _____

Major: EEE CSE TE Other: _____

Email address: _____

At EEESAU, we would like to keep you informed of upcoming events through email. If you do not wish to be contacted, please tick the box below.

Please do not contact me.

Are you an IEEE member? Yes No

IEEE members are entitled to free reciprocal EEESAU membership. A current IEEE membership card must be presented with this form.

IEEE membership number: _____

Please return this form to EEESAU with either proof of current IEEE membership or the \$5 associate membership fee.

This membership will expire on 31 December of the current year.



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