



## ASUM 2020 – 50<sup>TH</sup> ANNIVERSARY CONFERENCE

### Expression of Interest – ASUM Convenor and Scientific Committee

ASUM is currently seeking expressions of interest from our members who are interested in working with ASUM to convene or join the scientific committee for ASUM 2020 – 50<sup>th</sup> Anniversary Conference. This meeting will be held at the International Convention Centre, Sydney 30 October -1 November 2020.

Members are invited to submit an expression of interest to volunteer for the following roles;

- Convenor
- Scientific chair/s – medical and sonographer member
- Scientific committee
- Social Committee
- Workshop coordinator

Criteria for this include:

- Align with ASUM mission and values
- Have good communication skills, be inclusive and diplomatic
- Effectively working within or leading a specialty team

Support your Society and colleagues by volunteering - this is a great opportunity for you to support education and ensure topics and delivery meet the learning outcomes you are looking for. This also provides an opportunity to engage with all ASUM members across our broad multidisciplinary membership base and the wider ultrasound community. ASUM will facilitate meetings relevant to the conference and/or specialty group on a regular basis to support the program build.

Don't have time to commit to a Committee? We would welcome your ideas, topics or speaker recommendations. Send us an email via [conference@asum.com.au](mailto:conference@asum.com.au) and we would be happy to present this to the Committee.

If you are interested, please:

1. Complete the details on page 2

Send your EoI to the ASUM Conference officer at [conference@asum.com.au](mailto:conference@asum.com.au) by **31 October 2019**.

\*Should you have any questions regarding these roles, please contact the office the email above or on +61 2 9438 2078.

Council will finalise the composition of the Scientific Committee, with a preference in both medical and sonographer members to ensure diversity and membership representation.

## Expression of Interest

### Conference Volunteer Position with ASUM 2020 - 50<sup>th</sup> Anniversary

Please complete the following information and return to the ASUM office via email [conference@asum.com.au](mailto:conference@asum.com.au)

Title: \_\_\_\_\_ Surname: \_\_\_\_\_ Given Name: \_\_\_\_\_

ASUM Membership ID Number: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Address(Work): \_\_\_\_\_

Address(Home): \_\_\_\_\_

My area of practice is (please tick):

Anaesthesia	Gastroenterology	Radiography
Breast	Intensive Care	Radiology
Cardiology	Neonatal	Research
Critical Care	Nephrology	Scientific
Education	Nuclear Medicine	Sonography
Emergency Medicine	Nursing	Sports medicine
Endocrine	Obstetrics/Gynaecology	Surgical
Engineering	Physicist	Therapeutic
Foetal medicine	Physiotherapy	Vascular
Geriatrics	Podiatry	Veterinary

Other  
(specify): \_\_\_\_\_

Current and previous positions held with ASUM and length of membership:

\_\_\_\_\_

I wish to express my interest to serve in the following capacity for ASUM 2020 Conference

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

Signature \_\_\_\_\_ Date: \_\_\_\_\_