

Membership Form 2009 / 2010

Date: _____

Full Name: _____ Signature: _____

Residential Address: _____

City: _____ Country: _____ Postcode: _____

Email: _____ Contact Number: _____

Professional Area of Work/Study: _____

Membership Renewal Membership Number: _____

New Annual Membership (Please tick one)

AU \$45 Member

AU \$15 Concession (Student/Senior)

AU \$225 Corporate Member (5 Memberships total included - please provide details by email)

Please note that for members who join between 1 January and 30 June 2010 the initial membership fee will be half the above.

Donation: \$..... All donations over \$2 are tax deductible.

Payments can be made either by bank transfer or cheque (Please Tick one)

Bank Transfer:
Emergency Architects Australia Limited
BSB 082-125 Acct No: 79370 7603
Please provide your name and a copy of the transfer

Cheque:
Emergency Architects Australia Limited
PO Box 1430 POTTS POINT NSW 1335

How did you find out about Emergency Architects Australia?

Friend Internet Presentation Other

May we publish your name / business name on our website? Yes / No

Note: Except for the information shown in the list of members, under no circumstances will we disclose personal data to anyone

