

c/o ACETA

PO Box 352

Northcote

VIC 3070

Tel. no. 03 9481 7706



## MEMBERSHIP APPLICATION

Company Name

ABN

Address

Corporate Web Address

Corporate Phone

Corporate Email Address

Primary Contact Name

Job Title

Phone

Email

Please briefly indicate the nature of your business

## TYPE OF MEMBERSHIP

**General Member** – for full details of general membership, please refer to the ACETA website, Become an ACETA member/Qualification for Membership

I declare we have the following number of employees (full time equivalent) and agree to pay the appropriate fee as outlined.

- |                          |                                   |               |
|--------------------------|-----------------------------------|---------------|
| <input type="checkbox"/> | Up to two full time employees:    | \$990 + GST   |
| <input type="checkbox"/> | Three full time employees:        | \$1,320 + GST |
| <input type="checkbox"/> | Four full time employees:         | \$1,650 + GST |
| <input type="checkbox"/> | Five or more full time employees: | \$1,980 + GST |

**Associate Member** – for full details of associate membership, please refer to the ACETA website, Become An ACETA member/Qualification for Membership

- |                          |             |
|--------------------------|-------------|
| <input type="checkbox"/> | \$495 + GST |
|--------------------------|-------------|

I/we understand that as a member of ACETA I/we agree to abide by its constitution. Failure to do this will result in cancellation of membership and I/we will no longer be able to use the ACETA logo in any way, including as a mark of probity.

Signature

Print name

Position/Title in the Company

Once completed please return application to [julie@aceta.org.au](mailto:julie@aceta.org.au)

