



Water Industry Operators Association of Australia MEMBERSHIP APPLICATION / RENEWAL 2019

Inc ABN 27 302 677 808

THIS FORM WILL BECOME A TAX INVOICE ON RECEIPT OF PAYMENT. PLEASE RETAIN A COPY FOR YOUR RECORDS.

Date: ___/___/___

MEMBERSHIP CATEGORY

Please tick the appropriate box

- 1 Year Individual Membership \$30 (inc. GST)**
- Corporate Membership \$280 (inc. GST)** Corporate members please complete both sides of the page.

MEMBERSHIP DETAILS

Name: Mr / Ms

Postal Address

(Individual members please provide your private mailing address.)

Suburb State Postcode

Date of Birth DD MM YEAR

Employer

Position

Telephone Fax

Mobile phone

E-mail

In the event of my admission as a member, I agree to be bound by the Rules of the Association, a copy of the Rules can be found on the WIOA website.

Signature

WIOA encourage the use of electronic correspondence to reduce paper wastage.

I wish to receive correspondence by E-mail in preference to Post Yes No

PAYMENT OPTIONS

EFT BANKING DETAILS

BSB: 033-254

A/C: 327-012

The following must be included on your payment:

- New members: Full name
- Renewing members: Invoice number and name

CREDIT CARD PAYMENTS Visa

Mastercard

Cardholders Name

Card Number

Expiry Date:

Amount (please circle): **\$30 / \$280**

Signature:

RETURN BY

Post PO Box 6012, Shepparton, Victoria, 3632 Fax 03 5821 6033 Email sherryn@wioa.org.au

2019

Office Use Only

New Renewal Date Paid: / / Rec No:



Water Industry Operators Association of Australia

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Corporate Members Details

The front of this form MUST be completed. Upon applying for a corporate membership, only ONE representative is nominated to receive all correspondence from WIOA.

Join the list of WIOA Members which includes a complimentary entry in the Corporate Members section of the WIOA website www.wioa.org.au/membership

Email a company profile (approximately 200 words) about your organisation's business, products or services to sherryn@wioa.org.au - this will appear in our Members Web directory. You are also invited to include a logo for the website.

If you have any queries regarding your corporate entry please contact WIOA on 03 5821 6744.

MEMBERSHIP DETAILS

Organisation

Web Address

NOMINATED REPRESENTATIVE (for website listing and will receive all correspondence).

Name

Position

E-mail

Telephone

Mobile phone

Fax

ADDRESS LISTING FOR WEBSITE

Same as front page or complete the following section

Address

Suburb State Postcode

Telephone Fax

OTHER CONTACTS

Don't lose contact with WIOA, please provide at least one other company contact. Other contacts will receive the heads-up email when conference site sales commence.

Name

Position

E-mail

Name

Position

E-mail

Name

Position

E-mail