



# MEMBERSHIP FORM

1<sup>st</sup> July 2009 to 30<sup>th</sup> June 2010

Know your state branch – turn over

ABN 65 174 780 885

Individual Members complete Part A	Part A
	Mr / Mrs / Ms / Miss /.....
First Name	
Surname	
	Deaf <input type="checkbox"/> Hearing <input type="checkbox"/>
Phone	TTY / SMS / Voice / Fax
Organisation (if applicable)	
Address	
State & Postcode	
Occupation	
Email Required for newsletter	

Couples Members complete Parts A & B	Part B – 2 <sup>nd</sup> person of couple
	Mr / Mrs / Ms / Miss /.....
First Name	
Surname	
	Deaf <input type="checkbox"/> Hearing <input type="checkbox"/>
Phone	TTY / SMS / Voice / Fax
Occupation	
Email required for newsletter	

If you are living overseas newsletters can only be received by email. If you wish to be affiliated with a State branch, please tick which state below:

NSW  QLD  SA  VIC  WA

Please tick your membership category:

<input type="checkbox"/> Ordinary Individual Member <i>Deaf</i> \$30.00	<input type="checkbox"/> Ordinary Corporate Member <i>An organisation operating in Australia, its States or Territories, promoting the interests of Deaf people with a majority of Deaf people on Board of Management. Email to <a href="mailto:info@auslanshop.com.au">info@auslanshop.com.au</a> for membership fees.</i> \$TBA
<input type="checkbox"/> Associate Individual Member <i>Hearing</i> \$30.00	
<input type="checkbox"/> Couples Members <i>Can be Deaf or hearing</i> \$50.00	
<input type="checkbox"/> Ordinary Individual Junior (0 – 17 years) Full-time student Pensioner <i>All persons must be Deaf Need to supply copy of student/ pension ID</i> \$25.00	<input type="checkbox"/> Associate Corporate Member <i>An organisation operating in Australia, its States or Territories, promoting the interest of Deaf people, and does not have a majority of Deaf people on Board of Management. Email to <a href="mailto:info@auslanshop.com.au">info@auslanshop.com.au</a> for membership fees.</i> \$TBA
<input type="checkbox"/> Deaf Australia Honorary Life Member <i>(for records updating purposes only)</i> \$NIL	

Payment Methods:

Cheque/Money Order to "The Auslan Shop"  Cash  Visa/Mastercard

Card Name: ..... Expiry Date: ...../...../.....

Amount \$..... Signed: ..... Date: ..../..../....

**Please post form and payment to:**

**The Auslan Shop PO Box 4681 North Rocks NSW 2151**

**Or pay online at [www.auslanshop.com.au](http://www.auslanshop.com.au)**

*Deaf Australia Inc /The Auslan Shop respects your privacy at all times. All information provided will remain strictly confidential within Deaf Australia and your state branch.*

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Amount: \$

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	<p>New South Wales Association of the Deaf Inc.</p> <p>Postal Address: PO Box 4681, North Rocks NSW 2151</p> <p>Office: 361-365 North Rocks Rd, North Rocks NSW 2151</p> <p>TTY: (02) 9871 8400 FAX: (02) 9871 8218 E-mail: <a href="mailto:nswad@aad.org.au">nswad@aad.org.au</a> URL: <a href="http://www.nswad.org.au">www.nswad.org.au</a></p>
	<p>Queensland Association of the Deaf</p> <p>Postal Address: PO Box 1083, Stafford Qld 4053</p> <p>Office: 247 Stafford Road, Stafford Qld 4053</p> <p>E-mail: <a href="mailto:qad_inc@hotmail.com">qad_inc@hotmail.com</a></p>
	<p>Deaf Australia (SA) Inc.</p> <p>Office: c/- 262 South Terrace, Adelaide SA 5000</p> <p>TTY: (08) 8223 6530 FAX: (08) 8232 2217 Voice: (08) 8223 3335 E-mail: <a href="mailto:saad01au@gmail.com">saad01au@gmail.com</a></p>
	<p>Victorian Council of the Deaf Inc.</p> <p>Postal Address: PO Box 6186, St Kilda Road Central, Melbourne VIC 8008</p> <p>Office: 597 St Kilda Rd, Melbourne VIC 3004</p> <p>TTY: (03) 9521 2466 Voice: (03) 9521 2466 E-mail: <a href="mailto:info@vcod.com.au">info@vcod.com.au</a> URL: <a href="http://www.vcod.com.au">www.vcod.com.au</a></p>
	<p>Western Australian Association of the Deaf Inc.</p> <p>Postal Address: PO Box 8558, Perth BC WA 6849</p> <p>TTY: (08) 9441 2655 (Patricia Levitzke-Gray) FAX: (08) 9441 2616 (Attention: Patricia Levitzke-Gray)</p> <p>E-mail: <a href="mailto:waad6915@hotmail.com">waad6915@hotmail.com</a></p>