

# AHA Membership Form

Annual Membership: 1st July - 30th June



24/08/2007

PLEASE POST/FAX FORM TO:

**THE TREASURER  
AUSTRALIAN HYDROGRAPHERS ASSOCIATION  
C/- 14 Kosciuszko St  
TRARALGON VIC 3844**

**Fax N° (03) 5176 6475**

For Membership enquiries please  
email: [secretary@aha.net.au](mailto:secretary@aha.net.au)  
<http://www.aha.net.au/>

Please complete information below where applicable

Details	
I wish to become a Member of the Australian Hydrographers Association	<input checked="" type="checkbox"/>
Please renew my Membership of the Australian Hydrographers Association	<input type="checkbox"/>
Company: _____	
Name: _____	
Address: _____	
Suburb/Town: _____	State: _____ Post Code: _____
Country: _____	(Leave blank if 'Australia')
Phone: _____	Mobile: _____
Email: _____	Web Page: _____
Job Title: _____	
Employer: _____	
Work Address: _____	
Suburb/Town: _____	State: _____ Post Code: _____
Country: _____	(Leave blank if 'Australia')
Work Phone: _____	Work Fax: _____
Membership Type:	
Individual \$90 <input type="checkbox"/>	Student/Cadet/Retired \$30 <input type="checkbox"/> Corporate <input type="checkbox"/> Please Refer over <input type="checkbox"/>
<small>(Please circle type)</small>	
Please send all correspondence to my Home Address <input type="checkbox"/> Work Address <input type="checkbox"/>	
Payment	
Visa: <input type="checkbox"/> Mastercard: <input type="checkbox"/> EFT: <input type="checkbox"/> EFT Reference: _____	BSB N°:033-259 Account N°:130-104
Cheque: <input type="checkbox"/> <i>(Payable to 'Australian Hydrographers Association')</i>	
Credit Card N°: _____	Expiry: _____
Name on C/Card: _____	
Signature: _____	

Membership N° _____	Database Updated <input type="checkbox"/>	email List Updated <input type="checkbox"/>	AWA Notified <input type="checkbox"/>	Office Use Only
Date of Deposit _____	Receipt/Chq N° _____	Receipt Printed <input type="checkbox"/>		

# Corporate Membership Details

Membership Grade	Annual Fee	Included Members	Please Tick
Bronze	\$500	1	<input type="checkbox"/>
Silver	\$1,000	6	<input type="checkbox"/>
Gold	\$1,500	12	<input type="checkbox"/>
Platinum	\$2,000	20	<input type="checkbox"/>

## Included Members

As an Included Member the Postal Address will default to the Corporate Mailing Address unless otherwise stated below

N°	Name	Job Title	email	Existing Member N°
1	First Included Member is the primary contact for a Corporate Member - Please Complete front page			
2				
3				
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**Alternative Corporate Postal Address:** (Please attach extra Postal Addresses if required).

**Included Members:**

**Company:** \_\_\_\_\_

**Region/Branch:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Suburb/Town:** \_\_\_\_\_

**State:** \_\_\_\_\_ **Post Code:** \_\_\_\_\_

**Country:** \_\_\_\_\_

(Leave blank if 'Australia')