



MEMBERSHIP FORM

PLEASE COMPLETE THE FORM BELOW IN BLOCK LETTERS

Title: _____ Family Name: _____ Given Name: _____

Chinese Name: _____ Place of Employment: _____

Postal Address: _____

Email: _____ Mobile: _____

Please tick appropriate membership type in the box

	Volunteer Teachers \$10	Under 5 hrs per week or Students \$10	Over 5 hours per week of Teaching \$30	Associate Members \$10
New Membership				
Membership Renewal				
MLTAWA and CLTAWA Combined Membership	Complete the MLTAWA membership only - available via their website http://mltawa.asn.au/ Please email CLTAWA your receipt once payment is made to receive CLTAWA emails and other CLTAWA membership benefits immediately.			
Voluntary Contribution	\$_____ Thank you for your ongoing support to the CLTAWA.			

***Please Note: Applicants of MLTAWA Membership are requested to email a copy of their receipt to cltawa.perth@hotmail.com to ensure immediate CLTAWA membership benefits**

If you are joining **CLTAWA only** cheque should be made payable to 'Chinese Language Teachers' Association of WA" and sent to _____ or transfer amount to _____

The Treasurer, CLTAWA
PO Box 252
Bull Creek 6149

Account Name: Chinese Language Teachers' Association of Western Australia Inc.
BSB: 066-163
Account Number: 00900801

*I give/do not give permission for CLTAWA to take and use my photo or video for general publication.

EFT Receipt Number: _____
*Please quote your name as reference

Signature

Date

No GST is payable with this membership
Membership to the CLTAWA & MLTAWA is tax deductible
All Memberships are subject to approval by the CLTAWA Committee