



THE ORDER OF AUSTRALIA ASSOCIATION

# Membership Application

TAX INVOICE ABN 40 008 612 664

PLEASE PRINT CLEARLY IN BLOCK LETTERS

I, Title..... Given Names..... Family Name..... Post Nominals.....

of Mailing Address (Number/street/PO box).....

Suburb/town..... State/Territory..... Postcode..... Country (if not Aus.).....

Phone (.....)..... Mobile..... Email.....

Year of Birth (not Date of Birth)..... (this information is required for actuarial purposes only)

Having been (Please mark appropriate box)

**appointed:**  COMPANION AC  OFFICER AO  MEMBER AM in the Order of Australia **or awarded:** the  MEDAL of the Order of Australia OAM

on Australia Day (year)..... **or** King's Birthday (year)..... **or** other date (dd/mm/yyyy)..... /..... /.....

### Apply to be admitted to The Order of Australia Association Ltd. as:

Annual Member by annual payment of \$77.00 incl. GST

**or** a three year Annual Member at discounted rate of \$200.00 incl. GST

**or** a ten year Annual Member at discounted rate of \$655.00 incl. GST

**or** a Lifetime Member either by: one payment of \$1,155.00 incl. GST

**or** by two instalments\* each of \$577.50 incl. GST

**or** by four instalments\* each of \$288.75 incl. GST

**I agree** to be to be bound by the Constitution and By-Laws of The Order of Australia Association Ltd which are on the Association's website at **theorderofaustralia.asn.au**

**I wish** to be associated with the following Branch:

ACT  NSW  NT  QLD  SA  TAS

VIC  WA  Europe  North America  Overseas

Applicant's Signature..... Date (dd/mm/yyyy)..... /..... /.....

\*Please refer overleaf for instalment payment details

(Please turn over for payment options)

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OFFICE USE ONLY

I authorise payment to "The Order of Australia Association Ltd" of \$ \_\_\_\_\_ by  Mastercard or  VISA

Credit Card Number

Expiry Date \_\_\_\_\_ / \_\_\_\_\_ CVV Number \_\_\_\_\_ (3-digit number on back of card)

Cardholder's Name \_\_\_\_\_ Cardholder's Signature \_\_\_\_\_

Member No.
Date
Batch

or You may pay by EFT (electronic funds transfer) to: **The Order of Australia Assoc, BSB: 032719 Account number: 209696.** It is essential that you identify yourself in this option with YOUR FULL NAME so that your payment is processed accurately. This completed form must also be sent to our office so your details may be recorded.

or authorisation for DIRECT DEBIT (for **Annual Membership only**) either  from the Credit Card detailed above, or  from bank account:

Account Name: \_\_\_\_\_ BSB: \_\_\_\_\_ Account No.: \_\_\_\_\_

By signing below, I authorise the debiting of my Annual Membership subscription to  my **Credit Card**, or  my **Bank Account** as above:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ } (if joint account, all signatories are required)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

or I enclose  a cheque payable to "The Order of Australia Association Ltd"

**CONTRIBUTIONS TO THE ORDER OF AUSTRALIA ASSOCIATION FOUNDATION'S 'THE ASSOCIATION SCHOLARSHIP'**

Please tick this box to receive details about making a tax deductible contribution to the Foundation's 'The Association Scholarship'.

**PAPERLESS NATIONAL MAGAZINE**

Please tick this box to receive *The Order* (national magazine) in e-copy quarterly. Ensure you have included your email address overleaf.

**PLEASE DETACH AND SEND YOUR APPLICATION AND PAYMENT DETAILS TO:**

The Order of Australia Association, Old Parliament House,  
18 King George Terrace, PARKES ACT 2600

**LIFE MEMBERSHIP BY INSTALMENT**

If paying by instalments, the first instalment needs to be included with this application and the next instalment/s to complete the Life Membership fee will be required on the anniversary after the first instalment is paid.

The Life Membership Certificate is issued when all instalments have been received.

**ENQUIRIES** Email: [aaanatmbrofficer@theorderofaustralia.asn.au](mailto:aaanatmbrofficer@theorderofaustralia.asn.au) or Telephone: (02) 6273 0322



PLEASE CAREFULLY DETACH ALONG PERFORATION