



ANNUAL SUBSCRIPTION

ACCOUNT DUE

28TH FEBRUARY 2020

MEMBERSHIP NUMBER

OFFICE USE ONLY

RESIDENTIAL ADDRESS

POSTAL ADDRESS (PLEASE INCLUDE P/CODE)

PHONE - MOBILE

PHONE - HOME

EMAIL ADDRESS (MUST BE SUPPLIED TO RECEIVE PRESIDENT REPORTS, NEWSLETTERS, NOTIFICATIONS)

STUDIO/BUSINESS NAME

A.B.N.

STUDIO ADDRESS

STUDIO/BUSINESS PHONE

MEMBERSHIP TYPE & FEE PAYMENT MUST BE RECEIVED WITH FORM

- JUNIOR TEACHER** \$55.00 **AFFILIATE TEACHER** \$180.00 **PROBATIONARY** \$180.00
- ASSOCIATE TEACHER** \$155.00 **MEMBER TEACHER** \$155.00 **LICENTIATE TEACHER** \$155.00
- NEW MEMBER REGISTRATION** \$50.00 **RE-REGISTRATION FEE** (DUE FOR MEMBERSHIPS THAT HAVE LAPSED 1YR+) \$100.00
- LATE PAYMENT FEE** (DUE WITH PAYMENTS RECEIVED AFTER 28TH FEB) \$25.00

TOTAL AMOUNT PAYABLE (INCLUDES GST)

- I WOULD LIKE MY BUSINESS NAME, LOCATION, AND CONTACT DETAILS INCLUDED ON THE COMPANY WEBSITE (PLEASE SUPPLY INFORMATION IF DIFFERENT TO ABOVE DETAILS)
- I HAVE READ SECTION 3 OF THE ONLINE TEACHERS MANUAL, "CODE OF ETHICS", AND I ACKNOWLEDGE AND AM AWARE OF THE COMPANY'S CONDUCT GUIDELINES
- I UNDERSTAND THAT ATOD SYLLABI WORK MAY ONLY BE PRESENTED IN ATOD EXAMINATIONS/ASSESSMENTS AND MAY NOT BE PRESENTED FOR ASSESSMENT BY OTHER ORGANISATIONS OR IN-HOUSE ASSESSMENTS.
- I UNDERTAKE PROFESSIONAL DEVELOPMENT EACH YEAR YES NO IF YES PLEASE LIST DETAILS BELOW

PLEASE RETURN TO: PLEASE RETURN TO: SECRETARY@ATOD.NET.AU OR TRACEY JONSSON (COMPANY SECRETARY) PO BOX 565 WATERFORD QLD 4133

CREDIT CARD PAYMENT

NAME ON CARD

CARD NUMBER

EXPIRY DATE

CCV

DIRECT TRANSFER

WESTPAC BANK DETAILS BSB 033-337 A/C NO 131-680
(PLEASE QUOTE YOUR SURNAME AS THE REFERENCE NUMBER)

CHEQUE PAYMENT

PLEASE MAKE PAYABLE TO ATOD LTD, P O BOX 565
WATERFORD QLD 4133