



The International Association of Infant Massage, Australia Inc. (IAIM)

New Member Application - Organisation

1. Please indicate the type of organisation applying for membership to IAIM:

Small & Related Organisations	<input type="checkbox"/> Childcare centres <input type="checkbox"/> Schools <input type="checkbox"/> Maternity Centres/ Units <input type="checkbox"/> Research centres/ universities <input type="checkbox"/> Any not-for-profit organisations with fewer than 50 employees
Other organisations	<input type="checkbox"/> Other not-for-profit organisations with 51 or more employees <input type="checkbox"/> Companies/ private businesses <input type="checkbox"/> All other organisations

2. Please supply your organisation's contact details:

Privacy: We will not supply your personal details to any third party or make them public without your permission. We will only use your personal details for the purposes of contacting you about legitimate membership activities.

Title:	
First Name:	
Surname:	
Organisation/ business name:	
Postal address (please include suburb and state):	
Postal code:	
Country:	
Business hours phone:	
Fax:	
Mobile:	
Email:	
Website (if applicable):	

3. Organisational Applicants

Please provide a brief statement describing your reason for wanting to become a member of IAIM Australia:	
Please list any other associations, organisations or professional groups that your organisation is currently a member of:	
Are you interested in working with IAIM on relevant projects or partnerships?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure

4. Statement

I certify that I am authorised to sign this form on behalf of the named organisation. On behalf of the organisation I hereby agree to abide by the rules and regulations of this Association (available on the IAIM website). I understand that if I do not abide by the rules and regulations my membership may be revoked and no refund issued.

Name	
Signature	
Date	

5. Payment

Step 1: Please view our schedule of membership fees to determine the appropriate membership rate. Membership is renewable on the 9th March 2011.

Step 2: Please indicate your method of payment. All amounts must be in Australian dollars. Our preferred payment methods are:

- Cheque/ money order** (made payable to "International Association of Infant Massage, Australia Inc.)
- Direct deposit** (Westpac BSB: 032189, Account Number 126 682. Include your surname and "membership" as the reference)

We also accept payment via:

- Credit Card/ PayPal** (via account: president1@iaim.com.au)

Step 3: If you have paid via direct deposit or PayPal, please attaché a printout of your receipt to this form.

Step 4: Post this form and any attachments to:

**IAIM Membership Officer
33 Griffin Place
Huntington Heights NSW 2767
Australia**

OFFICE USE ONLY

Date received _____ Payment details _____

Member No _____ Signed _____ Processed _____