

ABN 65 174 780 885

Know your state branch – turn over

Individual Members complete Part A	Part A
	Mr / Mrs / Ms / Miss /.....
First Name	
Surname	
	Deaf <input type="checkbox"/> Hearing <input type="checkbox"/>
Phone	TTY / SMS / Voice / Fax
Organisation (if applicable)	
Address	
State & Postcode	
Occupation	
Email Required for newsletter	

Couples Members complete Parts A & B	Part B – 2 nd person of couple
	Mr / Mrs / Ms / Miss /.....
First Name	
Surname	
	Deaf <input type="checkbox"/> Hearing <input type="checkbox"/>
Phone	TTY / SMS / Voice / Fax
Occupation	
Email required for newsletter	

If you are living overseas newsletters can only be received by email. If you wish to be affiliated with a State branch, please tick which state below:

 NSW QLD SA VIC WA

Please tick your membership category:

<input type="checkbox"/> Ordinary Individual Member <i>Deaf</i> \$30.00 <input type="checkbox"/> Associate Individual Member <i>Hearing</i> \$30.00 <input type="checkbox"/> Couples Members <i>Can be Deaf or hearing</i> \$50.00	<input type="checkbox"/> Ordinary Corporate Member \$TBA <i>An organisation operating in Australia, its States or Territories, promoting the interests of Deaf people with a majority of Deaf people on Board of Management. Email to info@auslanshop.com.au for membership fees.</i>
<input type="checkbox"/> Ordinary Individual Junior (0 – 17 years) Full-time student Pensioner \$25.00 <i>All persons must be Deaf Need to supply copy of student/ pension ID</i>	<input type="checkbox"/> Associate Corporate Member \$TBA <i>An organisation operating in Australia, its States or Territories, promoting the interest of Deaf people, and does not have a majority of Deaf people on Board of Management. Email to info@auslanshop.com.au for membership fees.</i>
<input type="checkbox"/> Deaf Australia Honorary Life Member \$NIL <i>(for records updating purposes only)</i>	

Payment Methods:

 Cheque/Money Order to "The Auslan Shop" Cash Visa/Mastercard

Card Name: Expiry Date:/...../.....

Amount \$..... Signed: Date:/...../.....

Please post form and payment to:
The Auslan Shop PO Box 4681 North Rocks NSW 2151
Or pay online at www.auslanshop.com.au
Deaf Australia Inc /The Auslan Shop respects your privacy at all times. All information provided will remain strictly confidential within Deaf Australia and your state branch.

Office Use Only:






Date Banked:

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State Branch:

Amount: \$

Date Remitted:

	<p>New South Wales Association of the Deaf Inc.</p> <p>Postal Address: PO Box 4681, North Rocks NSW 2151</p> <p>Office: 361-365 North Rocks Rd, North Rocks NSW 2151</p> <p>TTY: (02) 9871 8400 FAX: (02) 9871 8218 E-mail: nswad@deafau.org.au URL: www.nswad.org.au</p>
	<p>Queensland Association of the Deaf</p> <p>Postal Address: PO Box 1083, Stafford Qld 4053</p> <p>Office: 247 Stafford Road, Stafford Qld 4053</p> <p>E-mail: qlddeaf@gmail.com</p>
	<p>Deaf Australia (SA) Inc.</p> <p>Office: c/- 262 South Terrace, Adelaide SA 5000</p> <p>TTY: (08) 8223 6530 FAX: (08) 8232 2217 Voice: (08) 8223 3335 E-mail: saad01au@gmail.com</p>
	<p>Victorian Council of the Deaf Inc.</p> <p>Postal Address: PO Box 6186, St Kilda Road Central, Melbourne VIC 8008</p> <p>Office: 597 St Kilda Rd, Melbourne VIC 3004</p> <p>TTY: (03) 9521 2466 Voice: (03) 9521 2466 E-mail: info@vcod.com.au URL: www.vcod.com.au</p>
	<p>Western Australian Association of the Deaf Inc.</p> <p>Postal Address: PO Box 8558, Perth BC WA 6849</p> <p>TTY: (08) 9441 2655 (Patricia Levitzke-Gray) FAX: (08) 9441 2616 (Attention: Patricia Levitzke-Gray)</p> <p>E-mail: waad6915@hotmail.com</p>