

ORGANISATION MEMBER APPLICATION FORM



ORGANISATION (PLEASE COMPLETE ALL FIELDS)

ORGANISATION NAME:		
<input type="text"/>		
ADDRESS:		
<input type="text"/>		
SUBURB:	STATE:	POSTCODE:
<input type="text"/>	<input type="text"/>	<input type="text"/>
COUNTRY (IF OUTSIDE AUSTRALIA)		
<input type="text"/>		
INDUSTRY:	NUMBER OF PEOPLE IN YOUR HR TEAM:	
<input type="text"/>	<input type="text"/>	
ORGANISATION TYPE:	NUMBER OF EMPLOYEES:	
<input type="checkbox"/> Private <input type="checkbox"/> Public (Government) <input type="checkbox"/> Not for profit	<input type="checkbox"/> 1-99 <input type="checkbox"/> 100-499 <input type="checkbox"/> 500-999 <input type="checkbox"/> 1000+	

COMPANY ADMINISTRATOR (PLEASE COMPLETE ALL FIELDS)

TITLE:	GIVEN NAME:	SURNAME:
<input type="text"/>	<input type="text"/>	<input type="text"/>
EMAIL ADDRESS:	PHONE:	
<input type="text"/>	<input type="text"/>	

• This is the person we will liaise with re: the renewal and administration of membership. Leave blank if principal member.

PRINCIPAL MEMBER (PLEASE COMPLETE ALL FIELDS)

TITLE:	GIVEN NAME:	SURNAME:
<input type="text"/>	<input type="text"/>	<input type="text"/>

*** IMPORTANT: Principal member must complete the linked member application form**

CONDITIONS OF MEMBERSHIP

All members are bound by the Constitution, the Code of Conduct and all by-laws, notices and directives of AHRI. Full terms and conditions of membership are available at ahri.com.au

Submission of your signed application form and annual membership fee constitutes your acceptance of the terms and conditions of membership of AHRI. I agree to abide by the Constitution and terms and conditions of membership of AHRI.

Signature:
Must sign for application to be processed

PAYMENT DETAIL

PLEASE SELECT MEMBERSHIP TYPE:

Organisation Member \$735 - Includes Principal Member only.

Additional Linked Members - If applicable, please attach 'Linked Member Application Form'.
See pricing table on linked member application form for additional members

All fees quoted are inclusive of GST. Upon payment of the appropriate amount you will receive a payment invoice.
Please keep a copy for taxation/claims purposes.

Payment Options (tick one)

I WISH TO PAY VIA INVOICE

I WISH TO PAY ONLINE

I WOULD LIKE AHRI TO CONTACT ME FOR PAYMENT DETAILS

PRIVACY STATEMENT: AHRI is concerned with the protection of your privacy. We support the Australian Privacy Principles (APPs) in the Privacy Act 1988 (Cth), as amended. AHRI collects and stores your personal information for the purposes of providing membership services, education and training programs. AHRI may use your contact details to promote AHRI products and services to you in the form of email communications and/or other types of communication. Email enquiries@ahri.com.au if you would prefer not to receive communications from AHRI. To view AHRI's full privacy policy visit ahri.com.au/privacy-policy.

OFFICE USE ONLY	MEMBER ID#: <input type="text"/>	WELCOME EMAIL SENT <input type="checkbox"/>	WELCOME LETTER SENT <input type="checkbox"/>
	DATE JOINED: <input type="text"/>	ORGANISATION CERTIFICATE SENT <input type="checkbox"/>	PAYMENT PROCESSED <input type="checkbox"/>