

# SAGE-AU

The System Administrators Guild of Australia

## Membership Application

Please note: SAGE-AU will not release your private details to any third party other than elected SAGE-AU executive members and staff unless your prior approval has been obtained.

To apply for membership for SAGE-AU, complete this form and return with payment to:

SAGE-AU  
Industry House, 375 Wickham Tce. Brisbane QLD 4000  
ABN 57 082 497 792

Fax: 07 3013 3420 (credit card payments)  
Enquiries – please phone 07 3842 2235 or  
Email [office@sage-au.org.au](mailto:office@sage-au.org.au)

I wish to apply for the following category of membership:

- |                                     |   |                         |
|-------------------------------------|---|-------------------------|
| <input checked="" type="checkbox"/> |   | <b>Fee</b><br>(inc GST) |
| <input type="checkbox"/>            | Individual Membership   | \$110.00                |
| <input type="checkbox"/>            | Associate Membership  | \$110.00                |
| <input type="checkbox"/>            | Student Membership (as from 1/1/11)<br><i>*please attach current student ID</i> | \$0.00                  |
| <input type="checkbox"/>            | Introductory trial (6mth) Membership  | \$60.00                 |

**PLEASE PRINT CLEARLY!**

First Name of Applicant	Surname of Applicant		
<input type="text"/>	<input type="text"/>		
Organisation	Occupation		
<input type="text"/>	<input type="text"/>		
Type of Employer: Government [ ] Educational [ ] Commercial [ ] Other [ ]			
This address is my Personal [ ] or Business [ ] address			
Street/Mail Box Details	City	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Home Phone	Work Phone		
<input type="text"/>	<input type="text"/>		
Mobile Phone	Fax		
<input type="text"/>	<input type="text"/>		
Email			
<input type="text"/>			
Where did you hear about SAGE-AU? If a member referred you, please enter their name.			
<input type="text"/>			

I am applying to become a Member of SAGE-AU. If admitted as a Member, I agree to be bound by the rules of the Association as set forth in the Governing Rules and as declared by the Managing Committee.

Signature of Applicant	Date
<input type="text"/>	<input type="text"/>

**Payment Details:** This application is a temporary invoice. A tax invoice will be issued within a few days.

- I have enclosed a cheque made out to SAGE-AU for the amount of: AUD\$ \_\_\_\_\_
- Please charge to the following credit card the amount of: AUD\$ \_\_\_\_\_
- Please tick: [ ] Visa [ ] MasterCard [ ] Amex [ ] Diner's Club (Amex/Diner's attract a 2.5% service fee)
- Cardholder Name: \_\_\_\_\_
- Card number: \_\_\_\_\_
- Card expiry date: \_\_\_\_ / \_\_\_\_ Batch code: \_\_\_\_\_  
Last 3 digits on Visa/MasterCard signature panel or on front of Amex card
- Signature: \_\_\_\_\_
- Paid by Direct Debit (Bendigo Bank; BSB: 633 000, Acct: 1188 16537) and have quoted my surname as reference.