

# 2018-19 Membership application



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Membership is for the Australian Infant, Child, Adolescent and Family Mental Health Association (ABN 87 093 479 022) trading as Emerging Minds from 1 July 2018 to 30 June 2019

All information supplied on this form will be kept confidential. The Association may from time to time release the name and contact phone number of members to people for professional purposes only. If you would prefer that none of your contact information is released, please indicate this below.

**I do not consent to the release of any of my contact details for any purpose.**

## Contact details (Please complete this section using your preferred contact details)

Title \_\_\_\_\_  
Name \_\_\_\_\_  
Position \_\_\_\_\_  
Organisation \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_ Country \_\_\_\_\_

Telephone \_\_\_\_\_

Email address \_\_\_\_\_

## Email list/s

I am a member of an Emerging Minds eNews list

Please add me to the Emerging Minds eNews list

## Payment details

**Cheque** (payable to AICAFMHA)

OR

**Electronic Funds Transfer**

Account Name: AICAFMHA

BSB: 065-115

A/C No: 10123005

Please include your name as the payment reference

## Membership Rate (rates include GST)

- Consumer/Carer/Youth/Student **\$22.00**
- Professional **\$49.50**
- Organisation **\$99.00**