



Post all forms to:
 WASLA Inc. Membership
 P O Box 1272 West Perth WA 6872
 Email: wasla@wasla.asn.au

WESTERN AUSTRALIAN SCHOOL LIBRARY ASSOCIATION INC.
 2020 Membership Form (including renewals)
 Tax Invoice

A copy of this form must be sent to the Executive Officer along with payment: wasla@wasla.asn.au

MEMBERSHIP FEES

<input type="checkbox"/>	Institutional	2 person membership	\$165.00 (inc GST)	\$
<input type="checkbox"/>	Teacher Librarian/Teacher	1 person membership	\$95.00	\$
<input type="checkbox"/>	Library Technician	1 person membership	\$75.00	\$
<input type="checkbox"/>	Library Officer	1 person membership	\$60.00	\$
<input type="checkbox"/>	Other:	1 person membership	\$50.00	\$
	<ul style="list-style-type: none"> • Student/Unwaged • Retired • Parental Leave 			
Total fee payable (inc GST)				\$

CONTACT DETAILS

Name/contact: _____ Position: _____
 School: _____
 Postal address: _____
 Phone: _____ Email: _____

Other memberships

ASLA ALIA AISWA Libraries ACS IASL CBCA/WA

Payment Methods

Cheques: Payable to WASLA Inc. **Address:** PO Box1272 WEST PERTH WA 6872

EFT:

Account name: WASLA Inc **Bank/Branch:** Bankwest **BSB:** 306107 **Account number:** 4198265

Please notify and send documentation of your deposit to **Barb Lippiatt** (WASLA Inc. Executive Officer) wasla@wasla.asn.au

Credit card details

Name on card: _____ **Amount:** \$ _____
Credit card number: _____ **Expiry date:** _____ / _____
Card Holder's Signature: _____

I accept that the typed name represents my electronic signature

PRIVACY STATEMENT

WASLA Inc. has a privacy policy that endorses the Australian Privacy Principles (2014) and the Australian Privacy Act 1998.

Please note: A receipt will be sent to your email address.