Membership Application Form 2007

• Network with other professionals in the field of learning difficulties • Receive regular publications
• Participate in workshops, seminars, and conferences • Become an LDA Consultant

Name _____

Address _____

_____

Email _____

Tel _____ Mobile _____

Degree/Qualification _____
(Individual Membership)

Current Occupation/Area of Interest _____
(Individual Membership)

Membership Categories

☐ Member $93.50

☐ Consultant Member $148.50 (subject to accreditation)

☐ Student Member $49.50 (student ID required)

☐ Institutional Member (includes schools) $165.00

☐ Please find my cheque attached for $_____

or

Charge my ☐ Bankcard ☐ VISA ☐ Mastercard

Card No ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ Expiry ____ /____ / ____

Name on Card _____

Signature _____ Date ____ / ____ / ____

☐ Please tick if a receipt is required

Please note that the correct email address to submit an application is ldaquery@bigpond.net.au
Send to LDA Subscriptions, PO Box 349, Carlton South Vic 3053